

Label

(See instructions on page 14.)

Use the IRS label.

Otherwise, please print or type.

Presidential

Election Campaign

L
A
B
E
L

H
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R
E

For the year Jan. 1-Dec. 31, 2009, or other tax year beginning

, 2009, ending

, 20

OMB No. 1545-0074

Your first name and initial

Last name

RAFAEL E

CRUZ

If a joint return, spouse's first name and initial

Last name

HEIDI S

CRUZ

Home address (number and street). If you have a P.O. box, see page 14.

Apt. no.

3900 BONNELL DRIVE

City, town or post office, state, and ZIP code. If you have a foreign address, see page 14.

AUSTIN, TX 78703

Your social security number

Spouse's social security number

You must enter
▲ your SSN(s) above.▲Checking a box below will not
change your tax or refund.

Check here if you, or your spouse if filing jointly, want \$3 to go to this fund (see page 14)

☒ You ☒ Spouse**Filing Status**1 ☐ Single2 ☒ Married filing jointly (even if only one had income)3 ☐ Married filing separately. Enter spouse's SSN above4 ☐ Head of household (with qualifying person). If the qualifying person is a child but not your dependent, enter this child's name here. ▶5 ☐ Qualifying widow(er) with dependent child (see page 16)

Check only one box.

Exemptions6a ☒ Yourself. If someone can claim you as a dependent, do not check box 6ab ☒ Spouse

c Dependents:

(1) First name

Last name

(2) Dependent's social security number

(3) Dependent's relationship to you

(4) ☒ If qualifying child for child tax credit (see page 17)

DAUGHTER

Boxes checked on 6a and 6b

2

No. of children on 6c who:

● lived with you 1
● did not live with you due to divorce or separation (see page 18)If more than four dependents, see page 17 and check here ▶ ☐

Dependents on 6c not entered above

Add numbers on lines above ▶

3

d Total number of exemptions claimed

Income

Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld.

If you did not get a W-2, see page 22.

Enclose, but do not attach, any payment. Also, please use Form 1040-V.

7 Wages, salaries, tips, etc. Attach Form(s) W-2

7 307,969.

8a Taxable interest. Attach Schedule B if required

8a 997.

b Tax-exempt interest. Do not include on line 8a

8b 5,586.

9a Ordinary dividends. Attach Schedule B if required

9a 4,090.

b Qualified dividends (see page 22)

9b 3,468.

10 Taxable refunds, credits, or offsets of state and local income taxes

10

11 Alimony received

11

12 Business income or (loss). Attach Schedule C or C-EZ

12

13 Capital gain or (loss). Attach Schedule D if required. If not required, check here ▶ ☐

13 <3,000.>

14 Other gains or (losses). Attach Form 4797

14

15a IRA distributions

15a

b Taxable amount

15b

16a Pensions and annuities

16a

b Taxable amount

16b

17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E

17 1,268,114.

18 Farm income or (loss). Attach Schedule F

18

19 Unemployment compensation in excess of \$2,400 per recipient (see page 27)

19

20a Social security benefits

20a

b Taxable amount (see page 27)

20b

21 Other income. List type and amount (see page 29)

21

22 Add the amounts in the far right column for lines 7 through 21. This is your total income ▶

22 1,578,170.

Adjusted Gross Income

23 Educator expenses (see page 29)

23

24 Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ

24

25 Health savings account deduction. Attach Form 8889

25

26 Moving expenses. Attach Form 3903

26

27 One-half of self-employment tax. Attach Schedule SE

27

24,309.

28 Self-employed SEP, SIMPLE, and qualified plans

28

49,000.

29 Self-employed health insurance deduction (see page 30)

29

4,474.

30 Penalty on early withdrawal of savings

30

31a Alimony paid b Recipient's SSN ▶

31a

32 IRA deduction (see page 31)

32

33 Student loan interest deduction (see page 34)

33

34 Tuition and fees deduction. Attach Form 8917

34

35 Domestic production activities deduction. Attach Form 8903

35

36 Add lines 23 through 31a and 32 through 35

36 77,783.

37 Subtract line 36 from line 22. This is your adjusted gross income ▶

37 1,500,387.

✓
mailed \$2
Tel 4-2-10

Department of the Treasury
Internal Revenue Service
Austin, TX, 73301-0002

918711
10-07-09

▼ DETACH HERE ▼

Form **4868**

Department of the Treasury
Internal Revenue Service (99)

**Application for Automatic Extension of Time
To File U.S. Individual Income Tax Return**

For calendar year 2009, or other tax year beginning

, 2009, ending

1019

2009

Part I Identification

1 Your name(s)

RAFAEL E CRUZ & HEIDI S CRUZ
3900 BONNELL DRIVE
AUSTIN, TX 78703

2 Your social security number

3 Spouse's social security number

Part II Individual Income Tax

4 Estimate of total tax liability for 2009 \$ **537,787.**

5 Total 2009 payments **247,787.**

6 Balance due. Subtract line 5
from line 4 **290,000. TR**

7 Amount you are paying **290,000.**

8 Check here if you are "out of the country" and a U.S.
citizen or resident ☐

9 Check here if you file Form 1040NR or 1040NR-EZ and did not receive
wages as an employee subject to U.S. income tax withholding ☐

Tax and Credits

Standard Deduction for -

- People who check any box on line 39a, 39b, or 40b **or** who can be claimed as a dependent.

- All others:

- Single or Married filing separately, \$5,700

- Married filing jointly or Qualifying widow(er), \$11,400

- Head of household, \$8,350

38	Amount from line 37 (adjusted gross income)	38	1,500,387.
39a	Check <input type="checkbox"/> You were born before January 2, 1945, <input type="checkbox"/> Blind. <input type="checkbox"/> Spouse was born before January 2, 1945, <input type="checkbox"/> Blind. Total boxes checked <input type="checkbox"/> 39a <input type="checkbox"/> 39b <input type="checkbox"/>		
40a	Itemized deductions (from Schedule A) or your standard deduction (see left margin) If you are increasing your standard deduction by certain real estate taxes, new motor vehicle taxes, or a net disaster loss, attach Schedule L and check here (see page 35) <input type="checkbox"/> 40b <input type="checkbox"/>	40a	140,878.
41	Subtract line 40a from line 38	41	1,359,509.
42	Exemptions. If line 38 is \$125,100 or less and you did not provide housing to a Midwestern displaced individual, multiply \$3,650 by the number on line 6d. Otherwise, see page 37	42	7,299.
43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	43	1,352,210.
44	Tax. Check if any tax is from: a <input type="checkbox"/> Form(s) 8814 b <input type="checkbox"/> Form 4972	44	442,942.
45	Alternative minimum tax. Attach Form 6251	45	0.
46	Add lines 44 and 45	46	442,942.
47	Foreign tax credit. Attach Form 1116 if required	47	
48	Credit for child and dependent care expenses. Attach Form 2441	48	
49	Education credits from Form 8863, line 29	49	
50	Retirement savings contributions credit. Attach Form 8880	50	
51	Child tax credit (see page 42)	51	
52	Credits from Form: a <input type="checkbox"/> 8396 b <input type="checkbox"/> 8839 c <input type="checkbox"/> 5695	52	
53	Other credits from Form: a <input checked="" type="checkbox"/> 3800 b <input type="checkbox"/> 8801 c <input type="checkbox"/>	53	1,410.
54	Add lines 47 through 53. These are your total credits	54	1,410.
55	Subtract line 54 from line 46. If line 54 is more than line 46, enter -0-	55	441,532.
56	Self-employment tax. Attach Schedule SE	56	48,618.
57	Unreported social security and Medicare tax from Form: a <input type="checkbox"/> 4137 b <input type="checkbox"/> 8919	57	
58	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	58	
59	Additional taxes: a <input type="checkbox"/> AEIC payments b <input checked="" type="checkbox"/> Household employment taxes. Attach Schedule H	59	17,076.
60	Add lines 55 through 59. This is your total tax	60	507,226.
61	Federal income tax withheld from Forms W-2 and 1099	61	79,346.
62	2009 estimated tax payments and amount applied from 2008 return	62	184,118.
63	Making work pay and government retiree credits. Attach Schedule M	63	
64a	Earned income credit (EIC)	64a	
b	Nontaxable combat pay election <input type="checkbox"/> 64b <input type="checkbox"/>		
65	Additional child tax credit. Attach Form 8812	65	
66	Refundable education credit from Form 8863, line 16	66	
67	First-time homebuyer credit. Attach Form 5405	67	
68	Amount paid with request for extension to file (see page 72)	68	290,000.
69	Excess social security and tier 1 RRTA tax withheld (see page 72)	69	
70	Credits from Form: a <input type="checkbox"/> 2439 b <input type="checkbox"/> 4136 c <input type="checkbox"/> 8801 d <input type="checkbox"/> 8885	70	
71	Add lines 61, 62, 63, 64a, and 65 through 70. These are your total payments	71	553,464.
72	If line 71 is more than line 60, subtract line 60 from line 71. This is the amount you overpaid	72	46,238.
73a	Amount of line 72 you want refunded to you. If Form 8888 is attached, check here <input type="checkbox"/> Routing number <input type="checkbox"/> c Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings d Account number <input type="checkbox"/>	73a	
74	Amount of line 72 you want applied to your 2010 estimated tax	74	46,238.
75	Amount you owe. Subtract line 71 from line 60. For details on how to pay, see page 74	75	
76	Estimated tax penalty (see page 74)	76	

Payments

If you have a qualifying child, attach Schedule EIC.

Refund

Direct deposit? See page 73 and fill in 73b, 73c, and 73d, or Form 8888.

Amount You Owe**Third Party Designee**

Do you want to allow another person to discuss this return with the IRS (see page 75)? ☒ Yes. Complete the following. ☐ No

Designee's name **PREPARER** Phone no. **512-472-0795** Personal identification number (PIN) ☐

Sign Here

Joint return? See page 15. Keep a copy for your records.

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature	Date	Your occupation	Daytime phone number
<i>Heidi S Cruz</i>		ATTORNEY	
Spouse's signature. If a joint return, both must sign.	Date	Spouse's occupation	
		DIRECTOR	

Paid Preparer's Use Only

Preparer's signature *Heidi S Cruz CPA* Date **10-13-10** Check if self-employed ☐ Preparer's SSN or PTIN ☐

Firm's name (or yours if self-employed), address, and ZIP code **MEADOR & JONES, LLP** EIN ☐

2414 EXPOSITION BLVD, SUITE BC-230 Phone no. ☐

AUSTIN, TX 78703

**SCHEDULE A
(Form 1040)**

Department of the Treasury
Internal Revenue Service (99)
Name(s) shown on Form 1040

Itemized Deductions

▶ **Attach to Form 1040.** ▶ **See Instructions for Schedule A (Form 1040).**

OMB No. 1545-0074

2009

Attachment
Sequence No. **07**

Your social security number

RAFAEL E & HEIDI S CRUZ

**Medical
and
Dental
Expenses**

Caution. Do not include expenses reimbursed or paid by others.

1	Medical and dental expenses (See page A-1.)	1	
2	Enter amount from Form 1040, line 38	2	
3	Multiply line 2 by 7.5% (.075)	3	
4	Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-	4	

**Taxes You
Paid**

(See
page A-2.)

5	State and local (check only one box): a <input checked="" type="checkbox"/> Income taxes, or b <input type="checkbox"/> General sales taxes	5	SEE STATEMENT 5	48,327.
6	Real estate taxes (See page A-5.)	6		34,667.
7	New motor vehicle taxes from line 11 of the worksheet on page 2. Skip this line if you checked box 5b	7		
8	Other taxes. List type and amount ▶	8		
9	Add lines 5 through 8	9		82,994.

**Interest
You Paid**

(See
page A-6.)

Note.
Personal
interest is
not
deductible.

10	Home mortgage interest and points reported to you on Form 1098	10		62,197.
11	Home mortgage interest not reported to you on Form 1098. If paid to the person from whom you bought the home, see page A-7 and show that person's name, identifying no., and address ▶	11		
12	Points not reported to you on Form 1098	12		
13	Qualified mortgage insurance premiums (See page A-7.)	13		
14	Investment interest. Attach Form 4952 if required. (See page A-8.)	14		
15	Add lines 10 through 14	15		62,197.

**Gifts to
Charity**

If you made a
gift and got a
benefit for it,
see page A-8.

16	Gifts by cash or check	16	SEE STATEMENT 6	9,023.
17	Other than by cash or check. If any gift of \$250 or more, see page A-8. You must attach Form 8283 if over \$500	17		
18	Carryover from prior year	18		
19	Add lines 16 through 18	19		9,023.

**Casualty and
Theft Losses**

20	Casualty or theft loss(es). Attach Form 4684. (See page A-10.)	20		
----	--	----	--	--

**Job Expenses
and Certain
Miscellaneous
Deductions**

(See
page A-10.)

21	Unreimbursed employee expenses - job travel, union dues, job education, etc. Attach Form 2106 or 2106-EZ if required. (See page A-10.) ▶ FROM FORM 2106 2,598. FROM FORM 2106 9,865.	21		12,463.
22	Tax preparation fees	22		358.
23	Other expenses - investment, safe deposit box, etc. List type and amount ▶	23		
24	Add lines 21 through 23	24		12,821.
25	Enter amount from Form 1040, line 38	25	1,500,387.	
26	Multiply line 25 by 2% (.02)	26		30,008.
27	Subtract line 26 from line 24. If line 26 is more than line 24, enter -0-	27		0.

**Other
Miscellaneous
Deductions**

28	Other - from list on page A-11. List type and amount ▶	28		
----	---	----	--	--

**Total
Itemized
Deductions**

29	Is Form 1040, line 38, over \$166,800 (over \$83,400 if married filing separately)? <input type="checkbox"/> No. Your deduction is not limited. Add the amounts in the far right column for lines 4 through 28. Also, enter this amount on Form 1040, line 40a. <input checked="" type="checkbox"/> Yes. Your deduction may be limited. See page A-11 for the amount to enter.	29	STMT 7 ▶	140,878.
30	If you elect to itemize deductions even though they are less than your standard deduction, check here	30		

Worksheet Before you begin: ✓ You cannot take this deduction if the amount on Form 1040, line 38, is equal to or greater than \$135,000 (\$260,000 if married filing jointly).
 ✓ See the instructions for line 7 on page A-6.

New motor vehicle taxes

Use this worksheet to figure the amount to enter on line 7.

(Keep a copy for your records.)

1 Enter the state or local sales or excise taxes you paid in 2009 for the purchase of any new motor vehicle(s) after February 16, 2009 (see page A-6)	1			
2 Enter the purchase price (before taxes) of the new motor vehicle(s)	2			
3 Is the amount on line 2 more than \$49,500? <input type="checkbox"/> No. Enter the amount from line 1. <input type="checkbox"/> Yes. Figure the portion of the tax from line 1 that is attributable to the first \$49,500 of the purchase price of each new motor vehicle and enter it here (see page A-6).			3	
4 Enter the amount from Form 1040, line 38	4			
5 Enter the total of any - • Amounts from Form 2555, lines 45 and 50; Form 2555-EZ, line 18; and Form 4563, line 15, and • Exclusion of income from Puerto Rico	5			
6 Add lines 4 and 5	6			
7 Enter \$125,000 (\$250,000 if married filing jointly)	7			
8 Is the amount on line 6 more than the amount on line 7? <input type="checkbox"/> No. Enter the amount from line 3 above on Schedule A, line 7. Do not complete the rest of this worksheet. <input type="checkbox"/> Yes. Subtract line 7 from line 6	8			
9 Divide the amount on line 8 by \$10,000. Enter the result as a decimal (rounded to at least three places). If the result is 1.000 or more, enter 1.000	9			
10 Multiply line 3 by line 9			10	
11 Deduction for new motor vehicle taxes. Subtract line 10 from line 3. Enter the result here and on Schedule A, line 7			11	

Schedule A (Form 1040) 2009

SCHEDULE B
(Form 1040A or 1040)

Department of the Treasury
Internal Revenue Service (99)
Name(s) shown on return

Interest and Ordinary Dividends

▶ **Attach to Form 1040A or 1040.**

▶ **See instructions.**

OMB No. 1545-0074

2009

Attachment
Sequence No. **08**

Your social security number

RAFAEL E & HEIDI S CRUZ

Part I
Interest

- 1 List name of payer. If any interest is from a seller-financed mortgage and the buyer used the property as a personal residence, see page B-1 and list this interest first. Also, show that buyer's social security number and address ▶

BANK OF AMERICA

GOLDMAN SACHS

UNIVERSITY FEDERAL CREDIT UNION

ING DIRECT

AMEX BANK

FROM K-1 - ENTERPRISE PRODUCTS PARTNERS

Note. If you received a Form 1099-INT, Form 1099-OID, or substitute statement from a brokerage firm, list the firm's name as the payer and enter the total interest shown on that form.

SUBTOTAL FOR LINE 1

TAX-EXEMPT INTEREST

SEE STATEMENT 8

- 2 Add the amounts on line 1
- 3 Excludable interest on series EE and I U.S. savings bonds issued after 1989. Attach Form 8815
- 4 Subtract line 3 from line 2. Enter the result here and on Form 1040A, or Form 1040, line 8a ▶

Note. If line 4 is over \$1,500, you must complete Part III.

Part II
Ordinary Dividends

- 5 List name of payer ▶

GOLDMAN SACHS

FROM K-1 - MORGAN LEWIS

FROM K-1 - ENTERPRISE PRODUCTS PARTNERS

Note: If you received a Form 1099-DIV or substitute statement from a brokerage firm, list the firm's name as the payer and enter the ordinary dividends shown on that form.

- 6 Add the amounts on line 5. Enter the total here and on Form 1040A, or Form 1040, line 9a ▶

Note. If line 6 is over \$1,500, you must complete Part III.

Part III
Foreign Accounts and Trusts

You must complete this part if you (a) had over \$1,500 of taxable interest or ordinary dividends; (b) had a foreign account; or (c) received a distribution from, or were a grantor of, or a transferor to, a foreign trust.

- 7a At any time during 2009, did you have an interest in or a signature or other authority over a financial account in a foreign country, such as a bank account, securities account, or other financial account? See page B-2 for exceptions and filing requirements for Form TD F 90-22.1
- b If "Yes," enter the name of the foreign country ▶
- 8 During 2009, did you receive a distribution from, or were you the grantor of, or transferor to, a foreign trust? If "Yes," you may have to file Form 3520. See page B-2

Yes No

X

X

Amount

241.

5,598.

46.

593.

95.

10.

6,583.

<5,586.>

997.

997.

Amount

4,081.

8.

1.

4,090.

927501
10-20-09

LHA For Paperwork Reduction Act Notice, see Form 1040A or 1040 instructions.

Schedule B (Form 1040A or 1040) 2009

**SCHEDULE D
(Form 1040)**

Department of the Treasury
Internal Revenue Service (99)
Name(s) shown on return

Capital Gains and Losses

▶ Attach to Form 1040 or Form 1040NR. ▶ See Instructions for Schedule D (Form 1040).
▶ Use Schedule D-1 to list additional transactions for lines 1 and 8.

OMB No. 1545-0074

2009
Attachment
Sequence No. **12**

Your social security number

RAFAEL E & HEIDI S CRUZ

Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less

(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold (Mo., day, yr.)	(d) Sales price	(e) Cost or other basis	(f) Gain or (loss) Subtract (e) from (d)
1 400 SH MOTORS LIQUIDATION	VARIOUS	04/17/09	230.	2,607.	<2,377.>
2 Enter your short-term totals, if any, from Schedule D-1, line 2	2				
3 Total short-term sales price amounts. Add lines 1 and 2 in column (d)	3		230.		
4 Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824	4				
5 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1	5				
6 Short-term capital loss carryover. Enter the amount, if any, from line 10 of your Capital Loss Carryover Worksheet in the instructions	6				(11,381.)
7 Net short-term capital gain or (loss). Combine lines 1 through 6 in column (f)	7				<13,758.>

Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year

(a) Description of property (Example: 100 sh. XYZ Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold (Mo., day, yr.)	(d) Sales price	(e) Cost or other basis	(f) Gain or (loss) Subtract (e) from (d)
8 3000 SH BLACKROCK MUNI	VARIOUS	05/14/09	31,636.	51,598.	<19,962.>
9 Enter your long-term totals, if any, from Schedule D-1, line 9	9				
10 Total long-term sales price amounts. Add lines 8 and 9 in column (d)	10		31,636.		
11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) from Forms 4684, 6781, and 8824	11				
12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1	12				
13 Capital gain distributions	13				
14 Long-term capital loss carryover. Enter the amount, if any, from line 15 of your Capital Loss Carryover Worksheet in the instructions	14				(3,147.)
15 Net long-term capital gain or (loss). Combine lines 8 through 14 in column (f). Then go to Part III on page 2	15				<23,109.>

LHA For Paperwork Reduction Act Notice, see Form 1040 or Form 1040NR instructions.

Schedule D (Form 1040) 2009

Part III Summary

16 Combine lines 7 and 15 and enter the result	16	<36,867.>
If line 16 is: <ul style="list-style-type: none">• A gain, enter the amount from line 16 on Form 1040, line 13, or Form 1040NR, line 14. Then go to line 17 below.• A loss, skip lines 17 through 20 below. Then go to line 21. Also be sure to complete line 22.• Zero, skip lines 17 through 21 below and enter -0- on Form 1040, line 13, or Form 1040NR, line 14. Then go to line 22.		
17 Are lines 15 and 16 both gains? <input type="checkbox"/> Yes. Go to line 18. <input type="checkbox"/> No. Skip lines 18 through 21, and go to line 22.		
18 Enter the amount, if any, from line 7 of the 28% Rate Gain Worksheet on page D-8 of the instructions	18	
19 Enter the amount, if any, from line 18 of the Unrecaptured Section 1250 Gain Worksheet on page D-9 of the instructions	19	
20 Are lines 18 and 19 both zero or blank? <input checked="" type="checkbox"/> Yes. Complete Form 1040 through line 43, or Form 1040NR through line 40. Then complete the Qualified Dividends and Capital Gain Tax Worksheet on page 39 of the Instructions for Form 1040 (or in the Instructions for Form 1040NR). Do not complete lines 21 and 22 below. <input type="checkbox"/> No. Complete Form 1040 through line 43, or Form 1040NR through line 40. Then complete the Schedule D Tax Worksheet on page D-10 of the instructions. Do not complete lines 21 and 22 below.		
21 If line 16 is a loss, enter here and on Form 1040, line 13, or Form 1040NR, line 14, the smaller of: <ul style="list-style-type: none">• The loss on line 16 or• (\$3,000), or if married filing separately, (\$1,500) } SEE STATEMENT 9	21	(3,000.)
Note. When figuring which amount is smaller, treat both amounts as positive numbers.		
22 Do you have qualified dividends on Form 1040, line 9b, or Form 1040NR, line 10b? <input checked="" type="checkbox"/> Yes. Complete Form 1040 through line 43, or Form 1040NR through line 40. Then complete the Qualified Dividends and Capital Gain Tax Worksheet on page 39 of the Instructions for Form 1040 (or in the Instructions for Form 1040NR). <input type="checkbox"/> No. Complete the rest of Form 1040 or Form 1040NR.		

Schedule D (Form 1040) 2009

Qualified Dividends and Capital Gain Tax Worksheet - Line 44

Keep for Your Records

Name(s) shown on return RAFAEL E & HEIDI S CRUZ	Your SSN [REDACTED]
---	------------------------

Before you begin: ✓ See the instructions for line 44 that begin on page 37 to see if you can use this worksheet to figure your tax.
 ✓ If you do not have to file Schedule D and you received capital gain distributions, be sure you checked the box on line 13 of Form 1040.

1. Enter the amount from Form 1040, line 43. However, if you are filing Form 2555 or 2555-EZ (relating to foreign earned income), enter the amount from line 3 of the worksheet on page 38	1. <u>1,352,210.</u>
2. Enter the amount from Form 1040, line 9b* 2. <u>3,468.</u>	
3. Are you filing Schedule D?*	
<input checked="" type="checkbox"/> Yes. Enter the smaller of line 15 or 16 of Schedule D. If either line 15 or line 16 is a loss, enter -0- <input type="checkbox"/> No. Enter the amount from Form 1040, line 13	3.
4. Add lines 2 and 3	4. <u>3,468.</u>
5. If you are claiming investment interest expense on Form 4952, enter the amount from line 4g of that form. Otherwise, enter -0-	5. <u>0.</u>
6. Subtract line 5 from line 4. If zero or less, enter -0-	6. <u>3,468.</u>
7. Subtract line 6 from line 1. If zero or less, enter -0-	7. <u>1,348,742.</u>
8. Enter the smaller of:	
<ul style="list-style-type: none"> The amount on line 1, or \$ 33,950 if single or married filing separately, \$ 67,900 if married filing jointly or qualifying widow(er), \$ 45,500 if head of household. 	8. <u>67,900.</u>
9. Is the amount on line 7 equal to or more than the amount on line 8?	
<input checked="" type="checkbox"/> Yes. Skip lines 9 and 10; go to line 11 and check the "No" box. <input type="checkbox"/> No. Enter the amount from line 7	9.
10. Subtract line 9 from line 8	10.
11. Are the amounts on lines 6 and 10 the same?	
<input type="checkbox"/> Yes. Skip lines 11 through 14; go to line 15. <input checked="" type="checkbox"/> No. Enter the smaller of line 1 or line 6	11. <u>3,468.</u>
12. Enter the amount from line 10 (if line 10 is blank, enter -0-)	12. <u>0.</u>
13. Subtract line 12 from line 11	13. <u>3,468.</u>
14. Multiply line 13 by 15% (.15)	14. <u>520.</u>
15. Figure the tax on the amount on line 7. Use the Tax Table or Tax Computation Worksheet, whichever applies	15. <u>442,422.</u>
16. Add lines 14 and 15	16. <u>442,942.</u>
17. Figure the tax on the amount on line 1. Use the Tax Table or Tax Computation Worksheet, whichever applies	17. <u>443,636.</u>
18. Tax on all taxable income. Enter the smaller of line 16 or line 17. Also include this amount on Form 1040, line 44. If you are filing Form 2555 or 2555-EZ, do not enter this amount on Form 1040, line 44. Instead, enter it on line 4 of the worksheet on page 38	18. <u>442,942.</u>

* If you are filing Form 2555 or 2555-EZ, see the footnote in the worksheet on page 38 before completing this line.

SCHEDULE E
(Form 1040)

 Department of the Treasury
Internal Revenue Service (99)

Supplemental Income and Loss

 (From rental real estate, royalties, partnerships,
S corporations, estates, trusts, REMICs, etc.)

Attach to Form 1040, 1040NR, or Form 1041.

See Instructions for Schedule E (Form 1040).

OMB No. 1545-0074

2009

 Attachment
Sequence No. **13**

Name(s) shown on return

Your social security number

RAFAEL E & HEIDI S CRUZ
Part I Income or Loss From Rental Real Estate and Royalties Note. If you are in the business of renting personal property, use Schedule C or C-EZ (see page E-3). If you are an individual, report farm rental income or loss from Form 4835 on page 2, line 40.

1	List the type and address of each rental real estate property:	2	For each rental real estate property listed on line 1, did you or your family use it during the tax year for personal purposes for more than the greater of:	Yes	No
A	CONDO 3333 ALLEN PKWY UNIT 2606, HOUSTON, TX 77		• 14 days or	A	X
B	RENTAL HOUSE 1510 HARTFORD RD, AUSTIN, TX 78703		• 10% of the total days rented at fair rental value?	B	X
C			(See page E-3)	C	

Income:		Properties			Totals (Add columns A, B, and C.)	
		A	B	C		
3	Rents received	3	28,973.	22,967.	3	51,940.
4	Royalties received	4			4	
Expenses:						
5	Advertising	5				
6	Auto and travel (see page E-4)	6				
7	Cleaning and maintenance	7				
8	Commissions	8				
9	Insurance	9		2,075.		
10	Legal and other professional fees	10	200.	184.		
11	Management fees	11	2,750.			
12	Mortgage interest paid to banks, etc. (see page E-5)	12	15,497.	23,660.	12	39,157.
13	Other interest	13				
14	Repairs	14	75.	2,101.		
15	Supplies	15				
16	Taxes	16	7,120.	10,867.		
17	Utilities	17				
18	Other (list) SEE STATEMENT 10	18	6,536.			
19	Add lines 5 through 18	19	32,178.	38,887.	19	71,065.
20	Depreciation expense or depletion (see page E-5)	20	13,673.	10,909.	20	24,582.
21	Total expenses. Add lines 19 and 20	21	45,851.	49,796.		
22	Income or (loss) from rental real estate or royalty properties. Subtract line 21 from line 3 (rents) or line 4 (royalties). If the result is a (loss), see page E-5 to find out if you must file Form 6198	22	<16,878.>	<26,829.>		
23	Deductible rental real estate loss. Caution. Your rental real estate loss on line 22 may be limited. See page E-5 to find out if you must file Form 8582. Real estate professionals must complete line 43 on page 2	23	0.	0.		
24	Income. Add positive amounts shown on line 22. Do not include any losses	24			24	0.
25	Losses. Add royalty losses from line 22 and rental real estate losses from line 23. Enter total losses here	25			25	0.
26	Total rental real estate and royalty income or (loss). Combine lines 24 and 25. Enter the result here. If Parts II, III, IV, and line 40 on page 2 do not apply to you, also enter this amount on Form 1040, line 17, or Form 1040NR, line 18. Otherwise, include this amount in the total on line 41 on page 2	26			26	0.

Name(s) shown on return. Do not enter name and social security number if shown on page 1.

Your social security number

RAFAEL E & HEIDI S CRUZ

Caution. The IRS compares amounts reported on your tax return with amounts shown on Schedule(s) K-1.

Part II Income or Loss From Partnerships and S Corporations Note. If you report a loss from an at-risk activity for which any amount is not at risk, you must check column (e) on line 28 and attach Form 6198. See page E-1.

27 Are you reporting any loss not allowed in a prior year due to the at-risk or basis limitations, a prior year unallowed loss from a passive activity (if that loss was not reported on Form 8582), or unreimbursed partnership expenses? ☐ Yes ☒ No

If you answered "Yes," see page E-7 before completing this section.

28	(a) Name	(b) Enter P for partnership; S for S corporation	(c) Check if foreign partnership	(d) Employer identification number	(e) Check if any amount is not at risk
A	MORGAN LEWIS	P		23-0891050	
B	ENTERPRISE PRODUCTS PARTNERS	P		76-0568219	
C					
D					

Passive Income and Loss		Nonpassive Income and Loss		
(f) Passive loss allowed (attach Form 8582 if required)	(g) Passive income from Schedule K-1	(h) Nonpassive loss from Schedule K-1	(i) Section 179 expense deduction from Form 4562	(j) Nonpassive income from Schedule K-1
A				1,268,114.
PTPB	0.			
C				
D				
29a Totals				1,268,114.
b Totals				
30 Add columns (g) and (j) of line 29a				30 1,268,114.
31 Add columns (f), (h), and (i) of line 29b				31 ()
32 Total partnership and S corporation income or (loss). Combine lines 30 and 31. Enter the result here and include in the total on line 41 below				32 1,268,114.

Part III Income or Loss From Estates and Trusts

33	(a) Name	(b) Employer identification number
A		
B		

Passive Income and Loss		Nonpassive Income and Loss	
(c) Passive deduction or loss allowed (attach Form 8582 if required)	(d) Passive income from Schedule K-1	(e) Deduction or loss from Schedule K-1	(f) Other income from Schedule K-1
A			
B			
34a Totals			
b Totals			
35 Add columns (d) and (f) of line 34a			35
36 Add columns (c) and (e) of line 34b			36 ()
37 Total estate and trust income or (loss). Combine lines 35 and 36. Enter the result here and include in the total on line 41 below			37

Part IV Income or Loss From Real Estate Mortgage Investment Conduits (REMICs) - Residual Holder

38	(a) Name	(b) Employer identification number	(c) Excess inclusion from Schedules Q, line 2c	(d) Taxable income (net loss) from Schedules Q, line 1b	(e) Income from Schedules Q, line 3b
39	Combine columns (d) and (e) only. Enter the result here and include in the total on line 41 below				39

Part V Summary

40	Net farm rental income or (loss) from Form 4835. Also, complete line 42 below	40	
41	Total income or (loss). Combine lines 26, 32, 37, 39, and 40. Enter the result here and on Form 1040, line 17, or Form 1040NR, line 18	41	1,268,114.
42	Reconciliation of farming and fishing income. Enter your gross farming and fishing income reported on Form 4835, line 7; Schedule K-1 (Form 1065), box 14, code B; Schedule K-1 (Form 1120S), box 17, code U; and Schedule K-1 (Form 1041), line 14, code F (see page E-8)	42	
43	Reconciliation for real estate professionals. If you were a real estate professional (see page E-2), enter the net income or (loss) you reported anywhere on Form 1040 or Form 1040NR from all rental real estate activities in which you materially participated under the passive activity loss rules	43	

INCOME FROM PASSTHROUGH STATEMENT, PAGE 1

2009

SCHEDULE E

Name RAFAEL E CRUZ

Passthrough MORGAN LEWIS

ID 23-0891050

SSN/EIN

TAXPAYER

PARTNERSHIP

NONPASSIVE	K-1 Input	Prior Year Unallowed Basis Loss	Disallowed Due to Basis Limitation	Prior Year Unallowed At-Risk Loss	Disallowed Due to At-Risk	Prior Year Passive Loss	Disallowed Passive Loss	Tax Return
SCHEDULE E, PAGE 2								
Ordinary business income (loss)	1,259,069.							
Rental real estate income (loss)								
Other net rental income (loss)								
Intangible drilling costs/dry hole costs								
Self-charged passive interest expense								
Guaranteed payments	15,053.							
Section 179 and carryover								
Disallowed section 179 expense								
Net income (loss)	1,274,122.							1,274,122.
First passive other								
Second passive other								
Cost depletion								
Percentage depletion								
Depletion carryover								
Disallowed due to 65% limitation								
Unreimbursed expenses (nonpassive)								
Nonpassive other	<6,008.>							<6,008.>
Total Schedule E (page 2)	1,268,114.							1,268,114.
FORM 4797								
Section 1231 gain (loss)								
Section 179 recapture on disposition								
SCHEDULE D								
Net short-term cap. gain (loss)								
Net long-term cap. gain (loss)								
Section 1256 contracts & straddles ...								
FORM 4952								
Investment interest expense - Sch. A								
Other net investment income								
ITEMIZED DEDUCTIONS								
Charitable contributions								
Deductions related to portfolio income								
Other	44,575.							44,575.

SCHEDULE E

INCOME FROM PASSTHROUGH STATEMENT, PAGE 2

2009

Name RAFAEL E CRUZ

Passthrough MORGAN LEWIS

PARTNERSHIP

ID 23-0891050

SSN/EIN [REDACTED]

TAXPAYER

NONPASSIVE	K-1 Input	Prior Year Unallowed Basis Loss	Disallowed Due to Basis Limitation	Prior Year Unallowed At-Risk Loss	Disallowed Due to At-Risk	Prior Year Passive Loss	Disallowed Passive Loss	Tax Return
INTEREST AND DIVIDENDS								
Interest income								
Interest from U.S. bonds								
Ordinary dividends	8.							8.
Qualified dividends								
Tax-exempt interest income								
FORM 6251								
Depreciation adjustment after 12/31/86	1,291.							1,291.
Adjusted gain or loss	<433.>							<433.>
Beneficiary's AMT adjustment								
Depletion (other than oil)								
Other	1.							1.
MISCELLANEOUS								
Self-employment earnings (loss)/Wages	1,338,253.							1,338,253.
Gross farming & fishing inc								
Royalties								
Royalty expenses/depletion								
Undistributed capital gains credit								
Backup withholding								
Credit for estimated tax								
Cancellation of debt								
Medical insurance - 1040								
Dependent care benefits								
Retirement plans								
Qualified production activities income								
Passthrough adjustment to Form 1040								
Penalty on early withdrawal of savings								
NOL								
Other taxes/recapture of credits								
Credits	1,410.							1,410.
Casualty and theft loss								

INCOME FROM PASSTHROUGH STATEMENT, PAGE 1

2009

SCHEDULE E

Name RAFAEL E CRUZPassthrough ENTERPRISE PRODUCTS PARTNERSID 76-0568219SSN/EIN

PUBLICLY TRADED PARTNERSHIP

TAXPAYER

OTHER PASSIVE	K-1 Input	Prior Year Unallowed Basis Loss	Disallowed Due to Basis Limitation	Prior Year Unallowed At-Risk Loss	Disallowed Due to At-Risk	Prior Year Passive Loss	Disallowed Passive Loss	Tax Return
SCHEDULE E, PAGE 2								
Ordinary business income (loss)	<1,314.>							
Rental real estate income (loss)								
Other net rental income (loss)								
Intangible drilling costs/dry hole costs								
Self-charged passive interest expense								
Guaranteed payments								
Section 179 and carryover								
Disallowed section 179 expense								
Net income (loss)	<1,314.>						1,314.	
First passive other								
Second passive other								
Cost depletion								
Percentage depletion								
Depletion carryover								
Disallowed due to 65% limitation								
Unreimbursed expenses (nonpassive)								
Nonpassive other								
Total Schedule E (page 2)	<1,314.>						1,314.	
FORM 4797								
Section 1231 gain (loss)	<37.>						37.	
Section 179 recapture on disposition								
SCHEDULE D								
Net short-term cap. gain (loss)								
Net long-term cap. gain (loss)								
Section 1256 contracts & straddles ...								
FORM 4952								
Investment interest expense - Sch. A								
Other net investment income								
ITEMIZED DEDUCTIONS								
Charitable contributions								
Deductions related to portfolio income								
Other								

INCOME FROM PASSTHROUGH STATEMENT, PAGE 2

2009

SCHEDULE E

Name RAFAEL E CRUZ

Passthrough ENTERPRISE PRODUCTS PARTNERS

ID 76-0568219

SSN/EIN [REDACTED]

PUBLICLY TRADED PARTNERSHIP

TAXPAYER

OTHER PASSIVE	K-1 Input	Prior Year Unallowed Basis Loss	Disallowed Due to Basis Limitation	Prior Year Unallowed At-Risk Loss	Disallowed Due to At-Risk	Prior Year Passive Loss	Disallowed Passive Loss	Tax Return
INTEREST AND DIVIDENDS								
Interest income	10.							10.
Interest from U.S. bonds								
Ordinary dividends	1.							1.
Qualified dividends	1.							1.
Tax-exempt interest income								
FORM 6251								
Depreciation adjustment after 12/31/86	324.							324.
Adjusted gain or loss								
Beneficiary's AMT adjustment								
Depletion (other than oil)								
Other								
MISCELLANEOUS								
Self-employment earnings (loss)/Wages								
Gross farming & fishing inc								
Royalties								
Royalty expenses/depletion								
Undistributed capital gains credit								
Backup withholding								
Credit for estimated tax								
Cancellation of debt								
Medical insurance - 1040								
Dependent care benefits								
Retirement plans								
Qualified production activities income								
Passthrough adjustment to Form 1040								
Penalty on early withdrawal of savings								
NOL								
Other taxes/recapture of credits								
Credits								
Casualty and theft loss								

2009

RAFAEL E & HEIDI S CRUZ

Schedule K-1																	
Line Reference: (1065/1120S/1041)																	
		10/9/*	*	11/10/*	13/12/*	12/11/*	13/12/*	13/12/*	13/12/*	*/*	20/17/14	13/*/*	*	14/*/*	17/15/12	*/*/12	*/*/12
Entity No.	Act. No.	Section 1231 Gain (Loss)	Ordinary Gain (Loss) Form 4797	Other Income	Charitable Contributions 50%	Section 179 Expense	Deductions Related to Portfolio Income (2%)	Other Deductions	Investment Int. Expense (Schedule A)	Investment Int. Expense (Schedule E)	Investment Income	SE Health Insurance Premium	Wages for More Than 2% Shareholders	Net SE Earnings	AMT Depr Adj on Post '86 Property	Minimum Tax Adjustment	Exclusion Items
2	2							6,008.			8.			1338253	1,291.		
4	3	<37.>													324.		
Totals		<37.>						6,008.			8.			1338253	1,615.		
Component of:		Form 4797, Line 2	Form 4797, Line 10	Schedule E, Page 2, Various	Schedule A, Lines 16 & 17	Form 4562, Line 6	Schedule A, Line 23	Schedule E, Page 2, Various	Schedule A, Line 14	Schedule E, Page 2, Various	Form 4952, Line 4a	Form 1040, Line 29	Form 1040, Line 7	Schedule SE, Line 2	Form 6251, Line 19	Form 6251, Line 16	2009 Form 8801

* - No specific Schedule K-1 line reference for these amounts.

PASSTHROUGH RECAP - ADDITIONAL INFORMATION AND PRIOR YEAR AT-RISK CARRYOVERS

2009

514

[illegible]

Schedule E		PASSTHROUGH RECAP - CARRYOVERS TO NEXT YEAR														2009	
RAFAEL E & HEIDI S CRUZ																	
Entity No.	Act. No.	Schedule E Passive Activity Loss C/O	AMT Schedule E Passive Activity Loss C/O	ST Capital PAL C/O	AMT ST Capital PAL C/O	LT Capital PAL C/O	AMT LT Capital PAL C/O	Section 1231 PAL C/O	AMT Section 1231 PAL C/O	Ordinary PAL C/O	AMT Ordinary PAL C/O	Schedule E At-Risk Carryover	AMT Schedule E At-Risk Carryover	ST Capital At-Risk Carryover	AMT ST Capital At-Risk Carryover	LT Capital At-Risk Carryover	AMT LT Capital At-Risk Carryover
4	3	1,314.	990.					37.	37.								

Entity No.	Act. No.	Section 1231 At-Risk Carryover	AMT Section 1231 At-Risk Carryover	Form 4797 Ordinary At-Risk Carryover	AMT Form 4797 Ordinary At-Risk C/O	Charitable Contributions At-Risk Carryover	AMT Charitable Contributions At-Risk C/O	Section 179 Expense At-Risk C/O	AMT Section 179 Expense At-Risk C/O	Portfolio Income Deductions At-Risk C/O	Keogh, SEP, IRA At-Risk C/O	AMT Keogh, SEP, IRA At-Risk C/O	Other At-Risk Carryovers	AMT Other At-Risk Carryovers			
Totals																

Schedule E PASSTHROUGH RECAP - ADDITIONAL INFORMATION AND PRIOR YEAR BASIS CARRYOVERS														2009			
RAFAEL E & HEIDI S CRUZ																	
Schedule K-1 Line Reference: (1065/1120S/1041)																	
Entity No.	Act. No.	6b/5b/2b	11/10/*	13/*/*	13/12/14	13/12/*	15/13/*	15/13/13	15/13/13	15/13/*	15/13/*	20/17/13	*/*/*				
Entity No.	Act. No.	Qualified Dividends	Sec. 1256 Contracts & Straddles	Dependent Care Benefits	Qualified Production Activities Income	Employer's W-2 Wages	Undistributed Capital Gains	Empowerment Zone Credit	Credit for Increasing Research Activities	New Markets Credit	Credit for SS & Medicare Taxes	Recapture of Low-income Housing Credit	Royalty/Depletion Expenses				
2	2							1,144.									
4	3	1.															
Totals		1.						1,144.									
Component of:		Form 1040, Line 9b	Form 6781, Line 1	Form 2441, Line 14	Form 8903, Line 7	Form 8903, Line 15	Form 1040, Line 70	Form 8844, Line 3	Form 6765, Line 37	Form 8874, Line 2	Form 8846, Line 5	Form 8611, Line 8	Schedule E, Page 1 or 2				

Schedule K-1 Line Reference: (1065/1120S/1041)																	
Entity No.	Act. No.	Schedule E Basis Carryover	AMT Schedule E Basis Carryover	ST Basis Carryover	AMT Basis Carryover	LT Basis Carryover	AMT LT Basis Carryover	Sec. 1231 Basis Carryover	AMT Sec. 1231 Basis Carryover	4797-Ord. Basis Carryover	AMT 4797-Ord. Basis Carryover	Other Basis Carryovers	AMT Other Basis Carryovers				
Totals																	
Component of:		Basis Limitation Worksheet	Basis Limitation Worksheet	Basis Limitation Worksheet	Basis Limitation Worksheet	Basis Limitation Worksheet	Basis Limitation Worksheet	Basis Limitation Worksheet	Basis Limitation Worksheet	Basis Limitation Worksheet	Basis Limitation Worksheet	Basis Limitation Worksheet	Basis Limitation Worksheet				

Schedule E

Publicly Traded Partnerships

Name of Activity: ENTERPRISE PRODUCTS PARTNERS - ACTIVITY NO. 3

Activity net income

Activity net loss <1,351.>

Prior year unallowed losses

Net income (loss) <1,351.>

Total loss allowed from the PTP for 2009

Disallowed losses from this PTP 1,351.

Form or Schedule	Gain/Loss	Prior Year Carryover	Net Gain/Loss	Unallowed Loss	Allowed Loss
SCH E	<1,314.>	0.	<1,314.>	1,314.	
FORM 4797	<37.>	0.	<37.>	37.	
	<1,351.>		<1,351.>	1,351.	

Alternative Minimum Tax

Activity net income

Activity net loss <1,027.>

Prior year unallowed losses

Net income (loss) <1,027.>

Total loss allowed from the PTP for 2009

Disallowed losses from this PTP 1,027.

Alternative minimum tax adjustment

Form or Schedule	Gain/Loss	Prior Year Carryover	Net Gain/Loss	Unallowed Loss	Allowed Loss
SCH E	<990.>	0.	<990.>	990.	
FORM 4797	<37.>	0.	<37.>	37.	
	<1,027.>		<1,027.>	1,027.	

2009 DEPRECIATION AND AMORTIZATION REPORT

CONDO - 3333 ALLEN PKWY UNIT 2606, HOU

SCHEDULE E- 1

Asset No.	Description	Date Acquired			Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
1	CONDO & IMPROVEMENTS	11	01	08	SL	27.50	17	376,000.			376,000.	1,709.		13,673.
	TOTAL SCH E DEPRECIATION							376,000.			376,000.	1,709.		13,673.

2009 DEPRECIATION AND AMORTIZATION REPORT
 RENTAL HOUSE - 1510 HARTFORD RD, AUSTI

SCHEDULE E- 2

Asset No.	Description	Date Acquired			Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	* Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
	HOUSE & IMPROVEMENTS	03	01	08	SL	27.50	17	300,000.			300,000.	8,636.		10,909.
	LAND	03	01	08	L			50,000.			50,000.			0.
	TOTAL SCH E DEPRECIATION							350,000.			350,000.	8,636.		10,909.

Name of person with self-employment income (as shown on Form 1040)

Social security number of
person with self-employment
income

RAFAEL E CRUZ

Section B - Long Schedule SE

Part I Self-Employment Tax

Note. If your only income subject to self-employment tax is church employee income, skip lines 1 through 4b. Enter -0- on line 4c and go to line 5a. Income from services you performed as a minister or a member of a religious order is not church employee income. See page SE-1.

A If you are a minister, member of a religious order, or Christian Science practitioner and you filed Form 4361, but you had \$400 or more of other net earnings from self-employment, check here and continue with Part I <input type="checkbox"/>		
1a	Net farm profit or (loss) from Schedule F, line 36, and farm partnerships, Schedule K-1 (Form 1065), box 14, code A. Note. Skip lines 1a and 1b if you use the farm optional method (see page SE-4)	1a
b	If you received social security retirement or disability benefits, enter the amount of Conservation Reserve Program payments included on Schedule F, line 6b, or listed on Schedule K-1 (Form 1065), box 20, code Y	1b
2	Net profit or (loss) from Schedule C, line 31; Schedule C-EZ, line 3; Schedule K-1 (Form 1065), box 14, code A (other than farming); and Schedule K-1 (Form 1065-B), box 9, code J1. Ministers and members of religious orders, see pg SE-1 for types of income to report on this line. See pg SE-3 for other income to report. Note. Skip this line if you use the nonfarm optional method (see page SE-4) SEE STATEMENT 11	2 1,338,253.
3	Combine lines 1a, 1b, and 2	3 1,338,253.
4a	If line 3 is more than zero, multiply line 3 by 92.35% (.9235). Otherwise, enter amount from line 3	4a 1,235,877.
b	If you elect one or both of the optional methods, enter the total of lines 15 and 17 here	4b
c	Combine lines 4a and 4b. If less than \$400, stop; you do not owe self-employment tax. Exception. If less than \$400 and you had church employee income, enter -0- and continue	4c 1,235,877.
5a	Enter your church employee income from Form W-2. See page SE-1 for definition of church employee income	5a
b	Multiply line 5a by 92.35% (.9235). If less than \$100, enter -0-	5b
6	Net earnings from self-employment. Add lines 4c and 5b	6 1,235,877.
7	Maximum amount of combined wages and self-employment earnings subject to social security tax or the 6.2% portion of the 7.65% railroad retirement (tier 1) tax for 2009	7 106,800.00
8a	Total social security wages and tips (total of boxes 3 and 7 on Form(s) W-2) and railroad retirement (tier 1) compensation. If \$106,800 or more, skip lines 8b through 10, and go to line 11	8a 3,750.
b	Unreported tips subject to social security tax (from Form 4137, line 10)	8b
c	Wages subject to social security tax (from Form 8919, line 10)	8c
d	Add lines 8a, 8b, and 8c	8d 3,750.
9	Subtract line 8d from line 7. If zero or less, enter -0- here and on line 10 and go to line 11	9 103,050.
10	Multiply the smaller of line 6 or line 9 by 12.4% (.124)	10 12,778.
11	Multiply line 6 by 2.9% (.029)	11 35,840.
12	Self-employment tax. Add lines 10 and 11. Enter here and on Form 1040, line 56	12 48,618.
13	Deduction for one-half of self-employment tax. Multiply line 12 by 50% (.50). Enter the result here and on Form 1040, line 27	13 24,309.

Part II Optional Methods To Figure Net Earnings (see page SE-4)

Farm Optional Method. You may use this method only if (a) your gross farm income¹ was not more than \$6,540, or (b) your net farm profits² were less than \$4,721.

14	Maximum income for optional methods	14 4,360.00
15	Enter the smaller of: two-thirds (2/3) of gross farm income ¹ (not less than zero) or \$4,360. Also include this amount on line 4b above	15

Nonfarm Optional Method. You may use this method only if (a) your net nonfarm profits³ were less than \$4,721 and also less than 72.189% of your gross nonfarm income⁴ and (b) you had net earnings from self-employment of at least \$400 in 2 of the prior 3 years.

Caution. You may use this method no more than five times.

16	Subtract line 15 from line 14	16
17	Enter the smaller of: two-thirds (2/3) of gross nonfarm income ⁴ (not less than zero) or the amount on line 16. Also include this amount on line 4b above	17

¹ From Sch. F, line 11, and Sch. K-1 (Form 1065), box 14, code B.

² From Sch. F, line 36, and Sch. K-1 (Form 1065), box 14, code

A - minus the amount you would have entered on line 1b had you not used the optional method.

³ From Sch. C, line 31; Sch. C-EZ, line 3; Sch. K-1 (Form 1065), box 14, code A; and Sch. K-1 (Form 1065-B), box 9, code J1.

⁴ From Sch. C, line 7; Sch. C-EZ, line 1; Sch. K-1 (Form 1065), box 14, code C; and Sch. K-1 (Form 1065-B), box 9, code J2.

General Business Credit

► See instructions.
 ► Attach to your tax return.

OMB No. 1545-0895

2009

Attachment
 Sequence No. **22**

Identifying number

RAFAEL E & HEIDI S CRUZ

Part I Current Year Credit

Important: You may not be required to complete and file a separate credit form (shown in parentheses below) to claim the credit. For details, see the instructions.

1a Investment credit (Form 3468, Part II only) (attach Form 3468)	1a	
b Welfare-to-work credit (only from partnerships, S corporations, estates, and trusts)	1b	
c Credit for increasing research activities (Form 6765). (Individuals: see instructions)	1c	
d Low-income housing credit (Form 8586, Part I only) (enter EIN if claiming this credit from a pass-through entity:)	1d	
e Disabled access credit (Form 8826) (do not enter more than \$5,000)	1e	
f Renewable electricity production credit (Form 8835)	1f	
g Indian employment credit (Form 8845)	1g	
h Orphan drug credit (Form 8820)	1h	
i New markets credit (Form 8874) (enter EIN if claiming this credit from a pass-through entity:)	1i	
j Credit for small employer pension plan startup costs (Form 8881) (do not enter more than \$500)	1j	
k Credit for employer-provided child care facilities and services (Form 8882) (enter EIN if claiming this credit from a pass-through entity: 23-0891050)	1k	266.
l Biodiesel and renewable diesel fuels credit (attach Form 8864)	1l	
m Low sulfur diesel fuel production credit (Form 8896)	1m	
n Distilled spirits credit (Form 8906)	1n	
o Nonconventional source fuel credit (Form 8907)	1o	
p Energy efficient home credit (Form 8908)	1p	
q Energy efficient appliance credit (Form 8909)	1q	
r Alternative motor vehicle credit (Form 8910) (enter EIN if claiming this credit from a pass-through entity:)	1r	
s Alternative fuel vehicle refueling property credit (Form 8911)	1s	
t Credits for affected Midwestern disaster area employers (Form 5884-A)	1t	
u Mine rescue team training credit (Form 8923)	1u	
v Agricultural chemicals security credit (Form 8931)	1v	
w Credit for employer differential wage payments (Form 8932)	1w	
x Carbon dioxide sequestration credit (Form 8933)	1x	
y Qualified plug-in electric drive motor vehicle credit (Form 8936)	1y	
z Qualified plug-in electric vehicle credit (Form 8834, Part I only)	1z	
aa Credit for contributions to selected community development corporations (only from partnerships and S corporations)	1aa	
bb General credits from an electing large partnership (Schedule K-1 (Form 1065-B))	1bb	
2 Add lines 1a through 1bb	2	266.
3 Passive activity credits included on line 2 (see instructions)	3	
4 Subtract line 3 from line 2	4	266.
5 Passive activity credits allowed for 2009 (see instructions)	5	
6 Carryforward of general business credit to 2009. See instructions for the schedule to attach	6	
7 Carryback of general business credit from 2010 (see instructions)	7	
8 Current year credit. Add lines 4 through 7	8	266.

LHA For Paperwork Reduction Act Notice, see instructions.

Form 3800 (2009)

Part II Allowable Credit

9 Regular tax before credits: • Individuals. Enter the amount from Form 1040, line 44 or Form 1040NR, line 41 • Corporations. Enter the amount from Form 1120, Schedule J, line 2; or the applicable line of your return • Estates and trusts. Enter the sum of the amounts from Form 1041, Schedule G, lines 1a and 1b, or the amount from the applicable line of your return		9	442,942.
10 Alternative minimum tax: • Individuals. Enter the amount from Form 6251, line 36 • Corporations. Enter the amount from Form 4626, line 14 • Estates and trusts. Enter the amount from Schedule I (Form 1041), line 56 ...		10	
11 Add lines 9 and 10		11	442,942.
12a Foreign tax credit		12a	
b Credits from Form 1040, lines 48 through 52 (or Form 1040NR, lines 45 through 48); Form 8859, line 11; Form 8834, lines 22 and 29; Form 8910, line 21; Form 8911, line 23; Form 8936, line 14; and Schedule R, line 24		12b	
c Add lines 12a and 12b		12c	
13 Net income tax. Subtract line 12c from line 11. If zero, skip lines 14 through 17 and enter -0- on line 18a		13	442,942.
14 Net regular tax. Subtract line 12c from line 9. If zero or less, enter -0-		14	442,942.
15 Enter 25% (.25) of the excess, if any, of line 14 over \$25,000 (see instructions)		15	104,486.
16 Tentative minimum tax: • Individuals. Enter the amount from Form 6251, line 34 • Corporations. Enter the amount from Form 4626, line 12 • Estates and trusts. Enter the amount from Schedule I (Form 1041), line 54		16	396,763.
17 Enter the greater of line 15 or line 16		17	396,763.
18a Subtract line 17 from line 13. If zero or less, enter -0-		18a	46,179.
b For a corporation electing to accelerate the research credit, enter the bonus depreciation amount attributable to the research credit. (see instructions)		18b	
c Add lines 18a and 18b		18c	46,179.
19a Enter the smaller of line 8 or line 18c		19a	266.
C corporations: See the line 19a instructions if there has been an ownership change, acquisition, or reorganization.			
b Enter the smaller of line 8 or line 18a. If you made an entry on line 18b, go to line 19c; otherwise, skip line 19c		19b	266.
c Subtract line 19b from line 19a. This is the refundable amount for a corporation electing to accelerate the research credit. Include this amount on line 32g of Form 1120 (or the applicable line of your return)		19c	

Form 3800 (2009)

Part II Allowable Credit (Continued)**Note.** If you are not filing Form 8844, skip lines 20 through 24 and enter -0- on line 25.

20	Multiply line 16 by 75%	20	297,572.
21	Enter the greater of line 15 or line 20	21	297,572.
22	Subtract line 21 from line 13. If zero or less, enter -0-	22	145,370.
23	Subtract line 19b from line 22. If zero or less, enter -0-	23	145,104.
24	Enter the amount from Form 8844, line 10 or line 12	24	1,144.
25	Empowerment zone and renewal community employment credit allowed. Enter the smaller of line 23 or line 24	25	1,144.
26	Subtract line 15 from line 13. If zero or less, enter -0-	26	338,456.
27	Add lines 19b and 25	27	1,410.
28	Subtract line 27 from line 26. If zero or less, enter -0-	28	337,046.
29a	Enter the investment credit from Form 3468, Part III, line 19 (attach Form 3468)	29a	
b	Enter the work opportunity credit from Form 5884, line 10 or line 12	29b	
c	Enter the alcohol and cellulosic biofuel fuels credit from Form 6478, line 14 or line 16	29c	
d	Enter the low-income housing credit from Form 8586, Part II, line 18 or line 20	29d	
e	Enter the applicable part of the amount of the renewable electricity, refined coal, and Indian coal production credit from Form 8835, Part II, line 36 or line 38	29e	
f	Enter the credit for employer social security and Medicare taxes paid on certain employee tips from Form 8846, line 12	29f	
g	Enter the qualified railroad track maintenance credit from Form 8900, line 12	29g	
30	Add lines 29a through 29g	30	
31	Enter the smaller of line 28 or line 30	31	0.
32	Credit allowed for the current year. Add lines 27 and 31. Report the amount from line 32 (if smaller than the sum of lines 8, 24, and 30, see instructions) as indicated below or on the applicable line of your return: <ul style="list-style-type: none"> • Individuals. Form 1040, line 53 or Form 1040NR, line 49 • Corporations. Form 1120, Schedule J, line 5c • Estates and trusts. Form 1041, Schedule G, line 2c 	32	1,410.

Form 3800 (2009)

Sales of Business Property
(Also Involuntary Conversions and Recapture Amounts
Under Sections 179 and 280F(b)(2))
▶ Attach to your tax return. ▶ See separate instructions.

OMB No. 1545-0184

2009
Attachment
Sequence No. **27**

RAFAEL E & HEIDI S CRUZ

1 Enter the gross proceeds from sales or exchanges reported to you for 2009 on Form(s) 1099-B or 1099-S
(or substitute statement) that you are including on line 2, 10, or 20 **1**

Identifying number

Part I Sales or Exchanges of Property Used in a Trade or Business and Involuntary Conversions From Other Than Casualty or Theft-Most Property Held More Than 1 Year (see instructions)

(a) Description of property	(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)	(d) Gross sales price	(e) Depreciation allowed or allowable since acquisition	(f) Cost or other basis, plus improvements and expense of sale	(g) Gain or (loss) Subtract (f) from the sum of (d) and (e)
2 ENTERPRISE PRODUCTS PAIPARTNERS						0.
3 Gain, if any, from Form 4684, line 43						3
4 Section 1231 gain from installment sales from Form 6252, line 26 or 37						4
5 Section 1231 gain or (loss) from like-kind exchanges from Form 8824						5
6 Gain, if any, from line 32, from other than casualty or theft						6
7 Combine lines 2 through 6. Enter the gain or (loss) here and on the appropriate line as follows: Partnerships (except electing large partnerships) and S corporations. Report the gain or (loss) following the instructions for Form 1065, Schedule K, line 10, or Form 1120S, Schedule K, line 9. Skip lines 8, 9, 11, and 12 below. Individuals, partners, S corporation shareholders, and all others. If line 7 is zero or a loss, enter the amount from line 7 on line 11 below and skip lines 8 and 9. If line 7 is a gain and you did not have any prior year section 1231 losses, or they were recaptured in an earlier year, enter the gain from line 7 as a long-term capital gain on the Schedule D filed with your return and skip lines 8, 9, 11, and 12 below.						7
8 Nonrecaptured net section 1231 losses from prior years (see instructions)						8
9 Subtract line 8 from line 7. If zero or less, enter -0-. If line 9 is zero, enter the gain from line 7 on line 12 below. If line 9 is more than zero, enter the amount from line 8 on line 12 below and enter the gain from line 9 as a long-term capital gain on the Schedule D filed with your return (see instructions)						9

Part II Ordinary Gains and Losses (see instructions)

10 Ordinary gains and losses not included on lines 11 through 16 (include property held 1 year or less):

11 Loss, if any, from line 7						11
12 Gain, if any, from line 7 or amount from line 8, if applicable						12
13 Gain, if any, from line 31						13
14 Net gain or (loss) from Form 4684, lines 35 and 42a						14
15 Ordinary gain from installment sales from Form 6252, line 25 or 36						15
16 Ordinary gain or (loss) from like-kind exchanges from Form 8824						16
17 Combine lines 10 through 16						17
18 For all except individual returns, enter the amount from line 17 on the appropriate line of your return and skip lines a and b below. For individual returns, complete lines a and b below: a If the loss on line 11 includes a loss from Form 4684, line 39, column (b)(ii), enter that part of the loss here. Enter the part of the loss from income-producing property on Schedule A (Form 1040), line 28, and the part of the loss from property used as an employee on Schedule A (Form 1040), line 23. Identify as from "Form 4797, line 18a." See instructions b Redetermine the gain or (loss) on line 17 excluding the loss, if any, on line 18a. Enter here and on Form 1040, line 14						18a 18b

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form **4797** (2009)

Part III Gain From Disposition of Property Under Sections 1245, 1250, 1252, 1254, and 1255 (see instructions)

19 (a) Description of section 1245, 1250, 1252, 1254, or 1255 property:		(b) Date acquired (mo., day, yr.)	(c) Date sold (mo., day, yr.)
A			
B			
C			
D			
These columns relate to the properties on lines 19A through 19D.			
	►	Property A	Property B
		Property C	Property D
20	Gross sales price (Note: See line 1 before completing.)	20	
21	Cost or other basis plus expense of sale	21	
22	Depreciation (or depletion) allowed or allowable	22	
23	Adjusted basis. Subtract line 22 from line 21	23	
24	Total gain. Subtract line 23 from line 20	24	
25	If section 1245 property:		
a	Depreciation allowed or allowable from line 22	25a	
b	Enter the smaller of line 24 or 25a	25b	
26	If section 1250 property: If straight line depreciation was used, enter -0- on line 26g, except for a corporation subject to section 291.		
a	Additional depreciation after 1975 (see instructions)	26a	
b	Applicable percentage multiplied by the smaller of line 24 or line 26a (see instructions)	26b	
c	Subtract line 26a from line 24. If residential rental property or line 24 is not more than line 26a, skip lines 26d and 26e	26c	
d	Additional depreciation after 1969 and before 1976	26d	
e	Enter the smaller of line 26c or 26d	26e	
f	Section 291 amount (corporations only)	26f	
g	Add lines 26b, 26e, and 26f	26g	
27	If section 1252 property: Skip this section if you did not dispose of farmland or if this form is being completed for a partnership (other than an electing large partnership).		
a	Soil, water, and land clearing expenses	27a	
b	Line 27a multiplied by applicable percentage	27b	
c	Enter the smaller of line 24 or 27b	27c	
28	If section 1254 property:		
a	Intangible drilling and development costs, expenditures for development of mines and other natural deposits, mining exploration costs, and depletion (see instructions)	28a	
b	Enter the smaller of line 24 or 28a	28b	
29	If section 1255 property:		
a	Applicable percentage of payments excluded from income under section 126 (see instructions)	29a	
b	Enter the smaller of line 24 or 29a (see instructions)	29b	

Summary of Part III Gains. Complete property columns A through D through line 29b before going to line 30.

30	Total gains for all properties. Add property columns A through D, line 24	30	
31	Add property columns A through D, lines 25b, 26g, 27c, 28b, and 29b. Enter here and on line 13	31	
32	Subtract line 31 from line 30. Enter the portion from casualty or theft on Form 4684, line 37. Enter the portion from other than casualty or theft on Form 4797, line 6	32	

Part IV Recapture Amounts Under Sections 179 and 280F(b)(2) When Business Use Drops to 50% or Less (see instructions)

	(a) Section 179	(b) Section 280F(b)(2)
33	Section 179 expense deduction or depreciation allowable in prior years	33
34	Recomputed depreciation (see instructions)	34
35	Recapture amount. Subtract line 34 from line 33. See the instructions for where to report	35

Form **6251**Department of the Treasury
Internal Revenue Service (99)**Alternative Minimum Tax - Individuals**

▶ Attach to Form 1040 or Form 1040NR.

OMB No. 1545-0074

2009Attachment
Sequence No. **32**

Name(s) shown on Form 1040 or Form 1040NR

Your social security number

RAFAEL E & HEIDI S CRUZ**Part I Alternative Minimum Taxable Income**

1	If filing Schedule A (Form 1040), enter the amount from Form 1040, line 41 (minus any amount on Form 8914, line 6), and go to line 2. Otherwise, enter the amount from Form 1040, line 38 (minus any amount on Form 8914, line 6), and go to line 7. (If less than zero, enter as a negative amount.) ...	1	1,359,509.
2	Medical and dental. Enter the smaller of Schedule A (Form 1040), line 4, or 2.5% (.025) of Form 1040, line 38. If zero or less, enter -0-	2	
3	Taxes from Schedule A (Form 1040), lines 5, 6, and 8	3	82,994.
4	Enter the home mortgage interest adjustment, if any, from line 6 of the worksheet on page 2 of the instructions ...	4	
5	Miscellaneous deductions from Schedule A (Form 1040), line 27	5	
6	If Form 1040, line 38, is over \$166,800 (over \$83,400 if married filing separately), enter the amount from line 11 of the Itemized Deductions Worksheet on page A-11 of the instructions for Schedule A (Form 1040)	6	<13,336.>
7	If filing Schedule L (Form 1040A or 1040), enter as a negative amount the sum of lines 6 and 20 from that schedule	7	
8	Tax refund from Form 1040, line 10 or line 21	8	
9	Investment interest expense (difference between regular tax and AMT)	9	
10	Depletion (difference between regular tax and AMT)	10	
11	Net operating loss deduction from Form 1040, line 21. Enter as a positive amount	11	
12	Alternative tax net operating loss deduction	12	
13	Interest from specified private activity bonds exempt from the regular tax SEE STATEMENT 12	13	1,097.
14	Qualified small business stock (7% of gain excluded under section 1202)	14	
15	Exercise of incentive stock options (excess of AMT income over regular tax income)	15	
16	Estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A)	16	
17	Electing large partnerships (amount from Schedule K-1 (Form 1065-B), box 6)	17	
18	Disposition of property (difference between AMT and regular tax gain or loss)	18	<433.>
19	Depreciation on assets placed in service after 1986 (difference between regular tax and AMT) STMT 13	19	1,291.
20	Passive activities (difference between AMT and regular tax income or loss)	20	0.
21	Loss limitations (difference between AMT and regular tax income or loss)	21	
22	Circulation costs (difference between regular tax and AMT)	22	
23	Long-term contracts (difference between AMT and regular tax income)	23	
24	Mining costs (difference between regular tax and AMT)	24	
25	Research and experimental costs (difference between regular tax and AMT)	25	
26	Income from certain installment sales before January 1, 1987	26	
27	Intangible drilling costs preference	27	
28	Other adjustments, including income-based related adjustments	28	
29	Alternative minimum taxable income. Combine lines 1 through 28. (If married filing separately and line 29 is more than \$216,900, see instructions.)	29	1,431,122.

Part II Alternative Minimum Tax (AMT)

30	Exemption. (If you were under age 24 at the end of 2009, see instructions.) IF your filing status is ... AND line 29 is not over ... THEN enter on line 30 ... Single or head of household \$112,500 \$46,700 Married filing jointly or qualifying widow(er) 150,000 70,950 Married filing separately 75,000 35,475 } If line 29 is over the amount shown above for your filing status, see instructions.	30	0.
31	Subtract line 30 from line 29. If more than zero, go to line 32. If zero or less, enter -0- here and on lines 34 and 36 and skip the rest of Part II	31	1,431,122.
32	• If you are filing Form 2555 or 2555-EZ, see page 9 of the instructions for the amount to enter. • If you reported capital gain distributions directly on Form 1040, line 13; you reported qualified dividends on Form 1040, line 9b; or you had a gain on both lines 15 and 16 of Schedule D (Form 1040) (as refigured for the AMT, if necessary), complete Part III on page 2 and enter the amount from line 55 here. • All others: If line 31 is \$175,000 or less (\$87,500 or less if married filing separately), multiply line 31 by 26% (.26). Otherwise, multiply line 31 by 28% (.28) and subtract \$3,500 (\$1,750 if married filing separately) from the result.	32	396,763.
33	Alternative minimum tax foreign tax credit (see instructions)	33	
34	Tentative minimum tax. Subtract line 33 from line 32	34	396,763.
35	Tax from Form 1040, line 44 (minus any tax from Form 4972 and any foreign tax credit from Form 1040, line 47). If you used Sch J to figure your tax, the amount from line 44 of Form 1040 must be refigured without using Sch J	35	442,942.
36	AMT. Subtract line 35 from line 34. If zero or less, enter -0-. Enter here and on Form 1040, line 45	36	0.

Part III Tax Computation Using Maximum Capital Gains Rates

37	Enter the amount from Form 6251, line 31. If you are filing Form 2555 or 2555-EZ, enter the amount from line 3 of the worksheet in the instructions	37	1,431,122.
38	Enter the amount from line 6 of the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 44, or the amount from line 13 of the Schedule D Tax Worksheet on page D-10 of the instructions for Schedule D (Form 1040), whichever applies (as refigured for the AMT, if necessary) (see the instructions). If you are filing Form 2555 or 2555-EZ, see instructions for the amount to enter	38	3,468.
39	Enter the amount from Schedule D (Form 1040), line 19 (as refigured for the AMT, if necessary) (see instructions). If you are filing Form 2555 or 2555-EZ, see instructions for the amount to enter	39	
40	If you did not complete a Schedule D Tax Worksheet for the regular tax or the AMT, enter the amount from line 38. Otherwise, add lines 38 and 39, and enter the smaller of that result or the amount from line 10 of the Schedule D Tax Worksheet (as refigured for the AMT, if necessary). If you are filing Form 2555 or 2555-EZ, see instructions for the amount to enter	40	3,468.
41	Enter the smaller of line 37 or line 40	41	3,468.
42	Subtract line 41 from line 37	42	1,427,654.
43	If line 42 is \$175,000 or less (\$87,500 or less if married filing separately), multiply line 42 by 26% (.26). Otherwise, multiply line 42 by 28% (.28) and subtract \$3,500 (\$1,750 if married filing separately) from the result	43	396,243.
44	Enter: <ul style="list-style-type: none"> • \$67,900 if married filing jointly or qualifying widow(er), • \$33,950 if single or married filing separately, or • \$45,500 if head of household. 	44	67,900.
45	Enter the amount from line 7 of the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 44, or the amount from line 14 of the Schedule D Tax Worksheet on page D-10 of the instructions for Schedule D (Form 1040), whichever applies (as figured for the regular tax). If you did not complete either worksheet for the regular tax, enter -0-	45	1,348,742.
46	Subtract line 45 from line 44. If zero or less, enter -0-	46	0.
47	Enter the smaller of line 37 or line 38	47	3,468.
48	Enter the smaller of line 46 or line 47	48	
49	Subtract line 48 from line 47	49	3,468.
50	Multiply line 49 by 15% (.15)	50	520.
If line 39 is zero or blank, skip lines 51 and 52 and go to line 53. Otherwise, go to line 51.			
51	Subtract line 47 from line 41	51	
52	Multiply line 51 by 25% (.25)	52	
53	Add lines 43, 50, and 52	53	396,763.
54	If line 37 is \$175,000 or less (\$87,500 or less if married filing separately), multiply line 37 by 26% (.26). Otherwise, multiply line 37 by 28% (.28) and subtract \$3,500 (\$1,750 if married filing separately) from the result	54	397,214.
55	Enter the smaller of line 53 or line 54 here and on line 32. If you are filing Form 2555 or 2555-EZ, do not enter this amount on line 32. Instead, enter it on line 4 of the worksheet in the instructions	55	396,763.

Form 6251 (2009)

ALTERNATIVE MINIMUM TAX RECONCILIATION REPORT

Name(s) **RAFAEL E & HEIDI S CRUZ** Social Security Number **[REDACTED]**

Form Name	Description	Income	Adjustment				
			Form 6251, Line 18	Form 6251, Line 19	Form 6251, Line 20	Form 6251, Line 21	Form 6251 Other Adjustment
K1-	MORGAN LEWIS						
	* REGULAR INCOME	1,268,114.					
	DEPR ADJ	1,291.		1,291.			
	ADJ GAIN/LOSS, LN	<433.>	<433.>				
	* AMT NET INCOME	1,268,972.	<433.>	1,291.			
	** TOTAL ADJ & PREF **		<433.>	1,291.			

**SCHEDULE H
(Form 1040)**

Department of the Treasury
Internal Revenue Service (99)

Household Employment Taxes

(For Social Security, Medicare, Withheld Income, and Federal Unemployment (FUTA) Taxes)

▶ Attach to Form 1040, 1040NR, 1040-SS, or 1041.

▶ See separate instructions.

OMB No. 1545-1971

2009

Attachment
Sequence No. **44**

Name of employer

Social security number

Employer identification number

HEIDI S CRUZ

26-3666129

A Did you pay **any one** household employee cash wages of \$1,700 or more in 2009? (If any household employee was your spouse, your child under age 21, your parent, or anyone under age 18, see the line A instructions on page H-4 before you answer this question.)

- ☒ **Yes.** Skip lines B and C and go to line 1.
☐ **No.** Go to line B.

B Did you withhold federal income tax during 2009 for any household employee?

- ☐ **Yes.** Skip line C and go to line 5.
☐ **No.** Go to line C.

C Did you pay **total** cash wages of \$1,000 or more in **any** calendar **quarter** of 2008 or 2009 to **all** household employees? (Do not count cash wages paid in 2008 or 2009 to your spouse, your child under age 21, or your parent.)

- ☐ **No.** **Stop.** Do not file this schedule.
☐ **Yes.** Skip lines 1-9 and go to line 10 on page 2. (Calendar year taxpayers having no household employees in 2009 do not have to complete this form for 2009.)

Part I Social Security, Medicare, and Federal Income Taxes

1 Total cash wages subject to social security taxes (see page H-4)	1	58,115.	
2 Social security taxes. Multiply line 1 by 12.4% (.124)	2		7,206.
3 Total cash wages subject to Medicare taxes (see page H-4)	3	58,115.	
4 Medicare taxes. Multiply line 3 by 2.9% (.029)	4		1,685.
5 Federal income tax withheld, if any	5		8,096.
6 Total social security, Medicare, and federal income taxes. Add lines 2, 4, and 5	6		16,987.
7 Advance earned income credit (EIC) payments, if any	7		
8 Net taxes (subtract line 7 from line 6)	8		16,987.

9 Did you pay **total** cash wages of \$1,000 or more in **any** calendar **quarter** of 2008 or 2009 to **all** household employees? (Do not count cash wages paid in 2008 or 2009 to your spouse, your child under age 21, or your parent.)

- ☐ **No.** **Stop.** Include the amount from line 8 above on Form 1040, line 59, and check box **b** on that line. If you are not required to file Form 1040, see the line 9 instructions on page H-4.
☒ **Yes.** Go to line 10 on page 2.

LHA For Privacy Act and Paperwork Reduction Act Notice, see page H-7 of the instructions.

Schedule H (Form 1040) 2009

Part II Federal Unemployment (FUTA) Tax

	Yes	No
10 Did you pay unemployment contributions to only one state? (If you paid contributions to Michigan, check "No.")	10	X
11 Did you pay all state unemployment contributions for 2009 by April 15, 2010? Fiscal year filers, see page H-5	11	X
12 Were all wages that are taxable for FUTA tax also taxable for your state's unemployment tax?	12	X

Next: If you checked the "Yes" box on **all** the lines above, complete Section A.If you checked the "No" box on **any** of the lines above, skip Section A and complete Section B.**Section A**

13 Name of the state where you paid unemployment contributions	TX	
14 State reporting number as shown on state unemployment tax return	11-753133-3	
15 Contributions paid to your state unemployment fund (see page H-5)	15	315.
16 Total cash wages subject to FUTA tax (see page H-5)	16	11,159.
17 FUTA tax. Multiply line 16 by .008. Enter the result here, skip Section B, and go to line 26	17	89.

Section B

18 Complete all columns below that apply (if you need more space, see page H-5):

(a) Name of state	(b) State reporting number as shown on state unemployment tax return	(c) Taxable wages (as defined in state act)	(d) State experience rate period		(e) State experience rate	(f) Multiply col. (c) by .054	(g) Multiply col. (c) by col. (e)	(h) Subtract col. (g) from col. (f). If zero or less, enter -0-.	(i) Contributions paid to state unemployment fund
			From	To					

19 Totals	19	
20 Add columns (h) and (i) of line 19	20	
21 Total cash wages subject to FUTA tax (see the line 16 instructions on page H-5)	21	
22 Multiply line 21 by 6.2% (.062)	22	
23 Multiply line 21 by 5.4% (.054)	23	
24 Enter the smaller of line 20 or line 23	24	
(Michigan employers must use the worksheet in the separate instructions and check here)	<input type="checkbox"/>	
25 FUTA tax. Subtract line 24 from line 22. Enter the result here and go to line 26	25	

Part III Total Household Employment Taxes

26 Enter the amount from line 8. If you checked the "Yes" box on line C of page 1, enter -0-	26	16,987.
27 Add line 17 (or line 25) and line 26 (see page H-5)	27	17,076.
28 Are you required to file Form 1040?		

☒ **Yes.** Stop. Include the amount from line 27 above on Form 1040, line 59, and check box **b** on that line. **Do not** complete Part IV below.

☐ **No.** You may have to complete Part IV. See page H-5 for details.

Part IV Address and Signature - Complete this part only if required. See the line 28 instructions on page H-5.

Address (number and street) or P.O. box if mail is not delivered to street address	Apt., room, or suite no.
City, town or post office, state, and ZIP code	

Under penalties of perjury, I declare that I have examined this schedule, including accompanying statements, and to the best of my knowledge and belief, it is true, correct, and complete. No part of any payment made to a state unemployment fund claimed as a credit was, or is to be, deducted from the payments to employees. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Employer's signature	Date
Paid Preparer's signature	Date
Preparer's firm's name (or yours if self-employed), address, and ZIP code	Check if self-employed <input type="checkbox"/> Preparer's SSN or PTIN
	EIN
	Phone no.

Schedule H (Form 1040) 2009

Passive Activity Loss Limitations

OMB No. 1545-1008

2009

Attachment
Sequence No. 88Department of the Treasury
Internal Revenue Service (99)▶ See separate instructions.
▶ Attach to Form 1040 or Form 1041.

Name(s) shown on return

Identifying number

RAFAEL E & HEIDI S CRUZ

Part I 2009 Passive Activity Loss Caution: Complete Worksheets 1, 2, and 3 on page 2 before completing Part I.**Rental Real Estate Activities With Active Participation** (For the definition of active participation, see Special Allowance for Rental Real Estate Activities on page 3 of the instructions.)

1a Activities with net income (enter the amount from Worksheet 1, column (a))	1a		
1b Activities with net loss (enter the amount from Worksheet 1, column (b))	1b	<43,707.>	
1c Prior years unallowed losses (enter the amount from Worksheet 1, column (c))	1c	<24,305.>	
1d Combine lines 1a, 1b, and 1c	1d	<68,012.>	

Commercial Revitalization Deductions From Rental Real Estate Activities

2a Commercial revitalization deductions from Worksheet 2, column (a)	2a		
2b Prior year unallowed commercial revitalization deductions from Worksheet 2, column (b)	2b		
2c Add lines 2a and 2b	2c		

All Other Passive Activities

3a Activities with net income (enter the amount from Worksheet 3, column (a))	3a		
3b Activities with net loss (enter the amount from Worksheet 3, column (b))	3b		
3c Prior years unallowed losses (enter the amount from Worksheet 3, column (c))	3c		
3d Combine lines 3a, 3b, and 3c	3d		

4 Combine lines 1d, 2c, and 3d. If the result is net income or zero, all losses are allowed, including any prior year unallowed losses entered on line 1c, 2b, or 3c. Do not complete Form 8582. Report the losses on the forms and schedules normally used	4	<68,012.>	
---	---	-----------	--

- If line 4 is a loss and:
- Line 1d is a loss, go to Part II.
 - Line 2c is a loss (and line 1d is zero or more), skip Part II and go to Part III.
 - Line 3d is a loss (and lines 1d and 2c are zero or more), skip Parts II and III and go to line 15.

Caution: If your filing status is married filing separately and you lived with your spouse at any time during the year, do not complete Part II or Part III. Instead, go to line 15.

Part II Special Allowance for Rental Real Estate Activities With Active Participation

Note: Enter all numbers in Part II as positive amounts. See page 8 of the instructions for an example.

5 Enter the smaller of the loss on line 1d or the loss on line 4	5	68,012.	
6 Enter \$150,000. If married filing separately, see the instructions	6	150,000.	
7 Enter modified adjusted gross income, but not less than zero (see the instr.)	7	1,524,696.	
Note: If line 7 is greater than or equal to line 6, skip lines 8 and 9, enter -0- on line 10. Otherwise, go to line 8.			
8 Subtract line 7 from line 6	8		
9 Multiply line 8 by 50% (.5). Do not enter more than \$25,000. If married filing separately, see the instructions	9		
10 Enter the smaller of line 5 or line 9	10	0.	
If line 2c is a loss, go to Part III. Otherwise, go to line 15.			

STATEMENT 18

Part III Special Allowance for Commercial Revitalization Deductions From Rental Real Estate Activities

Note: Enter all numbers in Part III as positive amounts. See the example for Part II on page 8 of the instructions.

11 Enter \$25,000 reduced by the amount, if any, on line 10. If married filing separately, see instructions	11		
12 Enter the loss from line 4	12		
13 Reduce line 12 by the amount on line 10	13		
14 Enter the smallest of line 2c (treated as a positive amount), line 11, or line 13	14		

Part IV Total Losses Allowed

15 Add the income, if any, on lines 1a and 3a and enter the total	15		
16 Total losses allowed from all passive activities for 2009. Add lines 10, 14, and 15. See the instructions to find out how to report the losses on your tax return	16	SEE STATEMENT 17	0.

Worksheet 1 - For Form 8582, Lines 1a, 1b, and 1c (See instructions.)**Worksheet 2 - For Form 8582, Lines 2a and 2b** (See instructions.)**Worksheet 3 - For Form 8582, Lines 3a, 3b, and 3c (See instructions.)**

Worksheet 4 - Use this worksheet if an amount is shown on Form 8582, line 10 or 14 (See instructions.)

Worksheet 5 - Allocation of Unallowed Losses (See instructions.)

Total	▶	68,012.	1.0000000000	68,012.
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Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Unallowed loss	(c) Allowed loss
SEE ATTACHED		STATEMENT FOR WORKSHEET		6
Total		68,012.	68,012.	

Name of activity:	(a)	(b)	(c) Ratio	(d) Unallowed loss	(e) Allowed loss
Form or schedule and line number to be reported on (see instructions):					
1a Net loss plus prior year unallowed loss from form or schedule					
b Net income from form or schedule					
c Subtract line 1b from line 1a. If zero or less, enter -0-					
Form or schedule and line number to be reported on (see instructions):					
1a Net loss plus prior year unallowed loss from form or schedule					
b Net income from form or schedule					
c Subtract line 1b from line 1a. If zero or less, enter -0-					
Form or schedule and line number to be reported on (see instructions):					
1a Net loss plus prior year unallowed loss from form or schedule					
b Net income from form or schedule					
c Subtract line 1b from line 1a. If zero or less, enter -0-					
Total					

Form 8582 (2009)

Form **8582**Department of the Treasury
Internal Revenue Service (99)**ALTERNATIVE MINIMUM TAX**
Passive Activity Loss Limitations▶ See separate instructions.
▶ Attach to Form 1040 or Form 1041.

OMB No. 1545-1008

2009
Attachment
Sequence No. **88**

Name(s) shown on return

Identifying number

RAFAEL E & HEIDI S CRUZ**Part I 2009 Passive Activity Loss** Caution: Complete Worksheets 1, 2, and 3 on page 2 before completing Part I.**Rental Real Estate Activities With Active Participation** (For the definition of active participation, see Special Allowance for Rental Real Estate Activities on page 3 of the instructions.)

1a Activities with net income (enter the amount from Worksheet 1, column (a))	1a		
b Activities with net loss (enter the amount from Worksheet 1, column (b))	1b	<43,707.>	
c Prior years unallowed losses (enter the amount from Worksheet 1, column (c))	1c	<24,305.>	
d Combine lines 1a, 1b, and 1c	1d	<68,012.>	

Commercial Revitalization Deductions From Rental Real Estate Activities

2a Commercial revitalization deductions from Worksheet 2, column (a)	2a		
b Prior year unallowed commercial revitalization deductions from Worksheet 2, column (b)	2b		
c Add lines 2a and 2b	2c		

All Other Passive Activities

3a Activities with net income (enter the amount from Worksheet 3, column (a))	3a		
b Activities with net loss (enter the amount from Worksheet 3, column (b))	3b		
c Prior years unallowed losses (enter the amount from Worksheet 3, column (c))	3c		
d Combine lines 3a, 3b, and 3c	3d		

4 Combine lines 1d, 2c, and 3d. If the result is net income or zero, all losses are allowed, including any prior year unallowed losses entered on line 1c, 2b, or 3c. Do not complete Form 8582. Report the losses on the forms and schedules normally used	4	<68,012.>	
--	----------	-----------	--

- If line 4 is a loss and:
- Line 1d is a loss, go to Part II.
 - Line 2c is a loss (and line 1d is zero or more), skip Part II and go to Part III.
 - Line 3d is a loss (and lines 1d and 2c are zero or more), skip Parts II and III and go to line 15.

Caution: If your filing status is married filing separately and you lived with your spouse at any time during the year, do not complete Part II or Part III. Instead, go to line 15.

Part II Special Allowance for Rental Real Estate Activities With Active Participation

Note: Enter all numbers in Part II as positive amounts. See page 8 of the instructions for an example.

5 Enter the smaller of the loss on line 1d or the loss on line 4	5	68,012.	
6 Enter \$150,000. If married filing separately, see the instructions	6	150,000.	
7 Enter modified adjusted gross income, but not less than zero (see the instr.)	7	1,524,696.	
Note: If line 7 is greater than or equal to line 6, skip lines 8 and 9, enter -0- on line 10. Otherwise, go to line 8.			
8 Subtract line 7 from line 6	8		
9 Multiply line 8 by 50% (.5). Do not enter more than \$25,000. If married filing separately, see the instructions	9		
10 Enter the smaller of line 5 or line 9	10	0.	

If line 2c is a loss, go to Part III. Otherwise, go to line 15.

Part III Special Allowance for Commercial Revitalization Deductions From Rental Real Estate Activities

Note: Enter all numbers in Part III as positive amounts. See the example for Part II on page 8 of the instructions.

11 Enter \$25,000 reduced by the amount, if any, on line 10. If married filing separately, see instructions	11		
12 Enter the loss from line 4	12		
13 Reduce line 12 by the amount on line 10	13		
14 Enter the smallest of line 2c (treated as a positive amount), line 11, or line 13	14		

Part IV Total Losses Allowed

15 Add the income, if any, on lines 1a and 3a and enter the total	15		
16 Total losses allowed from all passive activities for 2009. Add lines 10, 14, and 15. See the instructions to find out how to report the losses on your tax return	16	SEE STATEMENT 2.2	0.

Worksheet 6 - Allowed Losses (See instructions.)

Name of activity	Form or schedule and line number to be reported on (see instructions)	(a) Loss	(b) Unallowed loss	(c) Allowed loss
	SEE ATTACHED STATEMENT FOR WORKSHEET 6			
Total	▶	68,012.	68,012.	

Worksheet 7 - Activities With Losses Reported on Two or More Forms or Schedules (See instructions.)

Name of activity:	(a)	(b)	(c) Ratio	(d) Unallowed loss	(e) Allowed loss
Form or schedule and line number to be reported on (see instructions):					
1a Net loss plus prior year unallowed loss from form or schedule ▶					
b Net income from form or schedule ▶					
c Subtract line 1b from line 1a. If zero or less, enter -0- ▶					
Form or schedule and line number to be reported on (see instructions):					
1a Net loss plus prior year unallowed loss from form or schedule ▶					
b Net income from form or schedule ▶					
c Subtract line 1b from line 1a. If zero or less, enter -0- ▶					
Form or schedule and line number to be reported on (see instructions):					
1a Net loss plus prior year unallowed loss from form or schedule ▶					
b Net income from form or schedule ▶					
c Subtract line 1b from line 1a. If zero or less, enter -0- ▶					
Total ▶					

Form 8582 (2009)

**Empowerment Zone and Renewal
Community Employment Credit**

▶ Attach to your tax return.

2009Attachment
Sequence No. **99**

Name(s) shown on return

Identifying number

RAFAEL E & HEIDI S CRUZ

1 Enter the total qualified wages paid or incurred during calendar year 2009 only (see instructions)		
a	Qualified empowerment zone wages \$ X 20% (.20)	1a
b	Qualified renewal community wages \$ X 15% (.15)	1b
2	Add lines 1a and 1b. See instructions for the adjustment you must make to salaries and wages	2
3	Empowerment zone and renewal community employment credit from partnerships, S corporations, cooperatives, estates, and trusts	3 1,144.
4	Add lines 2 and 3. Partnerships and S corporations, report this amount on Schedule K; all others, go to line 5	4 1,144.
5	Empowerment zone and renewal community employment credit included on line 4 from passive activities (see instructions)	5
6	Subtract line 5 from line 4	6 1,144.
7	Passive activity credit allowed for 2009 (see instructions)	7
8	Carryforward of empowerment zone and renewal community employment credit to 2009	8
9	Carryback of empowerment zone and renewal community employment credit from 2010 (see instructions)	9
10	Add lines 6 through 9. Cooperatives, estates, and trusts, go to line 11. All others, report this amount on Form 3800, line 24	10 1,144.
11	Amount allocated to the patrons of the cooperative or the beneficiaries of the estate or trust (see instructions)	11
12	Cooperatives, estates, and trusts. Subtract line 11 from line 10. Report this amount on Form 3800, line 24	12

For Paperwork Reduction Act Notice, see instructions.

Form **8844** (2009)

Employee Business ExpensesDepartment of the Treasury
Internal Revenue Service (99)

▶ See separate instructions.

▶ Attach to Form 1040 or Form 1040NR.

2009
Attachment
Sequence No. **129**

Your name

Occupation in which you incurred expenses

Social security number

HEIDI S CRUZ**DIRECTOR****Part I Employee Business Expenses and Reimbursements****Step 1 Enter Your Expenses**

	Column A Other Than Meals and Entertainment	Column B Meals and Entertainment
1 Vehicle expense from line 22 or line 29. (Rural mail carriers: See instructions.) ...	1	
2 Parking fees, tolls, and transportation, including train, bus, etc., that did not involve overnight travel or commuting to and from work	2	2,598.
3 Travel expense while away from home overnight, including lodging, airplane, car rental, etc. Do not include meals and entertainment	3	
4 Business expenses not included on lines 1 through 3. Do not include meals and entertainment	4	
5 Meals and entertainment expenses (see instructions)	5	
6 Total expenses. In Column A, add lines 1 through 4 and enter the result. In Column B, enter the amount from line 5	6	2,598.

Note: If you were not reimbursed for any expenses in Step 1, skip line 7 and enter the amount from line 6 on line 8.

Step 2 Enter Reimbursements Received From Your Employer for Expenses Listed in Step 1

7 Enter reimbursements received from your employer that were not reported to you in box 1 of Form W-2. Include any reimbursements reported under code "L" in box 12 of your Form W-2 (see instructions)	7		
---	----------	--	--

Step 3 Figure Expenses To Deduct on Schedule A (Form 1040 or Form 1040NR)

8 Subtract line 7 from line 6. If zero or less, enter -0-. However, if line 7 is greater than line 6 in Column A, report the excess as income on Form 1040, line 7 (or on Form 1040NR, line 8)	8	2,598.	
Note: If both columns of line 8 are zero, you cannot deduct employee business expenses. Stop here and attach Form 2106 to your return.			
9 In Column A, enter the amount from line 8. In Column B, multiply line 8 by 50% (.50). (Employees subject to Department of Transportation (DOT) hours of service limits: Multiply meal expenses incurred while away from home on business by 80% (.80) instead of 50%. For details, see instructions.)	9	2,598.	
10 Add the amounts on line 9 of both columns and enter the total here. Also, enter the total on Schedule A (Form 1040), line 21 (or on Schedule A (Form 1040NR), line 9). (Armed Forces reservists, qualified performing artists, fee-basis state or local government officials, and individuals with disabilities: See the instructions for special rules on where to enter the total.)	10		2,598.

LHA For Paperwork Reduction Act Notice, see instructions.

Form 2106 (2009)

Part II Vehicle Expenses**Section A - General Information** (You must complete this section if you are claiming vehicle expenses.)

	(a) Vehicle	(b) Vehicle
11 Enter the date the vehicle was placed in service	11	
12 Total miles the vehicle was driven during 2009	12 miles	miles
13 Business miles included on line 12	13 miles	miles
14 Percent of business use. Divide line 13 by line 12	14 %	%
15 Average daily roundtrip commuting distance	15 miles	miles
16 Commuting miles included on line 12	16 miles	miles
17 Other miles. Add lines 13 and 16 and subtract the total from line 12	17 miles	miles
18 Was your vehicle available for personal use during off-duty hours?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

19 Do you (or your spouse) have another vehicle available for personal use? ☐ Yes ☐ No

20 Do you have evidence to support your deduction? ☐ Yes ☐ No

21 If "Yes," is the evidence written? ☐ Yes ☐ No

Section B - Standard Mileage Rate (See the instructions for Part II to find out whether to complete this section or Section C.)

22 Multiply line 13 by 55¢ (.55). Enter the result here and on line 1 22

	(a) Vehicle	(b) Vehicle
23 Gasoline, oil, repairs, vehicle insurance, etc.	23	
24a Vehicle rentals	24a	
b Inclusion amount (see instructions)	24b	
c Subtract line 24b from line 24a	24c	
25 Value of employer-provided vehicle (applies only if 100% of annual lease value was included on Form W-2-see instructions) ...	25	
26 Add lines 23, 24c, and 25	26	
27 Multiply line 26 by the percentage on line 14	27	
28 Depreciation (see instructions)	28	
29 Add lines 27 and 28. Enter total here and on line 1	29	

Section D - Depreciation of Vehicles (Use this section only if you owned the vehicle and are completing Section C for the vehicle.)

	(a) Vehicle	(b) Vehicle
30 Enter cost or other basis (see instructions)	30	
31 Enter section 179 deduction and special allowance (see instructions)	31	
32 Multiply line 30 by line 14 (see instructions if you claimed the section 179 deduction or special allowance)	32	
33 Enter depreciation method and percentage (see instructions)	33	
34 Multiply line 32 by the percentage on line 33 (see instructions)	34	
35 Add lines 31 and 34	35	
36 Enter the applicable limit explained in the line 36 instructions	36	
37 Multiply line 36 by the percentage on line 14	37	
38 Enter the smaller of line 35 or line 37. If you skipped lines 36 and 37, enter the amount from line 35. Also enter this amount on line 28 above	38	

Form 2106 (2009)

Employee Business Expenses

Department of the Treasury
Internal Revenue Service (99)▶ See separate instructions.
▶ Attach to Form 1040 or Form 1040NR.**2009**
Attachment
Sequence No. **129**

Your name

Occupation in which you incurred expenses

Social security number

RAFAEL E CRUZ

ATTORNEY

Part I Employee Business Expenses and Reimbursements

Step 1 Enter Your Expenses	Column A Other Than Meals and Entertainment	Column B Meals and Entertainment
1 Vehicle expense from line 22 or line 29. (Rural mail carriers: See instructions.) ...	1	
2 Parking fees, tolls, and transportation, including train, bus, etc., that did not involve overnight travel or commuting to and from work	2	2,598.
3 Travel expense while away from home overnight, including lodging, airplane, car rental, etc. Do not include meals and entertainment	3	
4 Business expenses not included on lines 1 through 3. Do not include meals and entertainment SEE STATEMENT 23	4	7,267.
5 Meals and entertainment expenses (see instructions)	5	
6 Total expenses. In Column A, add lines 1 through 4 and enter the result. In Column B, enter the amount from line 5	6	9,865.

Note: If you were not reimbursed for any expenses in Step 1, skip line 7 and enter the amount from line 6 on line 8.

Step 2 Enter Reimbursements Received From Your Employer for Expenses Listed in Step 1

7 Enter reimbursements received from your employer that were not reported to you in box 1 of Form W-2. Include any reimbursements reported under code "L" in box 12 of your Form W-2 (see instructions)	7	
---	---	--

Step 3 Figure Expenses To Deduct on Schedule A (Form 1040 or Form 1040NR)

8 Subtract line 7 from line 6. If zero or less, enter -0-. However, if line 7 is greater than line 6 in Column A, report the excess as income on Form 1040, line 7 (or on Form 1040NR, line 8)	8	9,865.
Note: If both columns of line 8 are zero, you cannot deduct employee business expenses. Stop here and attach Form 2106 to your return.		
9 In Column A, enter the amount from line 8. In Column B, multiply line 8 by 50% (.50). (Employees subject to Department of Transportation (DOT) hours of service limits: Multiply meal expenses incurred while away from home on business by 80% (.80) instead of 50%. For details, see instructions.)	9	9,865.
10 Add the amounts on line 9 of both columns and enter the total here. Also, enter the total on Schedule A (Form 1040), line 21 (or on Schedule A (Form 1040NR), line 9). (Armed Forces reservists, qualified performing artists, fee-basis state or local government officials, and individuals with disabilities: See the instructions for special rules on where to enter the total.)	10	9,865.

LHA For Paperwork Reduction Act Notice, see instructions.

Form 2106 (2009)

Part II Vehicle Expenses**Section A - General Information** (You must complete this section if you are claiming vehicle expenses.)

	(a) Vehicle	(b) Vehicle
11 Enter the date the vehicle was placed in service	11	
12 Total miles the vehicle was driven during 2009	12 miles	miles
13 Business miles included on line 12	13 miles	miles
14 Percent of business use. Divide line 13 by line 12	14 %	%
15 Average daily roundtrip commuting distance	15 miles	miles
16 Commuting miles included on line 12	16 miles	miles
17 Other miles. Add lines 13 and 16 and subtract the total from line 12	17 miles	miles
18 Was your vehicle available for personal use during off-duty hours?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

19 Do you (or your spouse) have another vehicle available for personal use? ☐ Yes ☐ No

20 Do you have evidence to support your deduction? ☐ Yes ☐ No

21 If "Yes," is the evidence written? ☐ Yes ☐ No

Section B - Standard Mileage Rate (See the instructions for Part II to find out whether to complete this section or Section C.)

22 Multiply line 13 by 55¢ (.55). Enter the result here and on line 1

22

Section C - Actual Expenses

	(a) Vehicle	(b) Vehicle
23 Gasoline, oil, repairs, vehicle insurance, etc.	23	
24a Vehicle rentals	24a	
b Inclusion amount (see instructions)	24b	
c Subtract line 24b from line 24a	24c	
25 Value of employer-provided vehicle (applies only if 100% of annual lease value was included on Form W-2--see instructions)	25	
26 Add lines 23, 24c, and 25	26	
27 Multiply line 26 by the percentage on line 14	27	
28 Depreciation (see instructions)	28	
29 Add lines 27 and 28. Enter total here and on line 1	29	

Section D - Depreciation of Vehicles (Use this section only if you owned the vehicle and are completing Section C for the vehicle.)

	(a) Vehicle	(b) Vehicle
30 Enter cost or other basis (see instructions)	30	
31 Enter section 179 deduction and special allowance (see instructions)	31	
32 Multiply line 30 by line 14 (see instructions if you claimed the section 179 deduction or special allowance)	32	
33 Enter depreciation method and percentage (see instructions)	33	
34 Multiply line 32 by the percentage on line 33 (see instructions)	34	
35 Add lines 31 and 34	35	
36 Enter the applicable limit explained in the line 36 instructions	36	
37 Multiply line 36 by the percentage on line 14	37	
38 Enter the smaller of line 35 or line 37. If you skipped lines 36 and 37, enter the amount from line 35. Also enter this amount on line 28 above	38	

Form 2106 (2009)

Form **8903**Department of the Treasury
Internal Revenue Service**Domestic Production Activities Deduction**

▶ Attach to your tax return. ▶ See separate instructions.

OMB No. 1545-1984

2009Attachment
Sequence No. **143**

Name(s) as shown on return

Identifying number

RAFAEL E & HEIDI S CRUZ

1 Domestic production gross receipts (DPGR)	1	11.
2 Allocable cost of goods sold. If you are using the small business simplified overall method, skip lines 2 and 3	2	
3 Enter deductions and losses allocable to DPGR (see instructions)	3	7.
4 If you are using the small business simplified overall method, enter the amount of cost of goods sold and other deductions or losses you ratably apportion to DPGR. All others, skip line 4	4	
5 Add lines 2 through 4	5	7.
6 Subtract line 5 from line 1	6	4.
7 Qualified production activities income from estates, trusts, and certain partnerships and S corporations (see instructions)	7	
8 Add lines 6 and 7. Estates and trusts, go to line 9, all others, skip line 9 and go to line 10	8	4.
9 Amount allocated to beneficiaries of the estate or trust (see instructions)	9	
10 Qualified production activities income. Estates and trusts, subtract line 9 from line 8, all others, enter amount from line 8. If zero or less, enter -0- here, skip lines 11 through 19, and enter -0- on line 20	10	4.
11 Income limitation (see instructions): <ul style="list-style-type: none"> Individuals, estates, and trusts. Enter your adjusted gross income figured without the domestic production activities deduction All others. Enter your taxable income figured without the domestic production activities deduction (tax-exempt organizations, see instructions) 	11	1,500,387.
12 Enter the smaller of line 10 or line 11. If zero or less, enter -0- here, skip lines 13 through 19, and enter -0- on line 20	12	4.
13 Enter 6% of line 12	13	
14 Form W-2 wages (see instructions)	14	
15 Form W-2 wages from estates, trusts, and certain partnerships and S corporations (see instructions)	15	
16 Add lines 14 and 15. Estates and trusts, go to line 17, all others, skip line 17 and go to line 18	16	
17 Amount allocated to beneficiaries of the estate or trust (see instructions)	17	
18 Estates and trusts, subtract line 17 from line 16, all others, enter amount from line 16	18	
19 Form W-2 wage limitation. Enter 50% of line 18	19	
20 Enter the smaller of line 13 or line 19	20	
21 Domestic production activities deduction from cooperatives. Enter deduction from Form 1099-PATR, box 6	21	
22 Expanded affiliated group allocation (see instructions)	22	
23 Domestic production activities deduction. Combine lines 20 through 22 and enter the result here and on Form 1040, line 35; Form 1120, line 25; or the applicable line of your return	23	0.

910911
12-01-09

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form **8903** (2009)

Qualified Production Activity Income Schedule

Name

RAFAEL E & HEIDI S CRUZ

Identifying Number:

[illegible]

FORM 1040 PERSONAL EXEMPTION WORKSHEET STATEMENT 1

1. IS THE AMOUNT ON FORM 1040, LINE 38, MORE THAN THE AMOUNT SHOWN ON LINE 4 BELOW FOR YOUR FILING STATUS?
 NO. STOP. MULTIPLY \$3,650 BY THE TOTAL NUMBER OF EXEMPTIONS CLAIMED ON FORM 1040, LINE 6D, AND ENTER THE RESULT ON LINE 42.
 YES. CONTINUE
2. MULTIPLY \$3,650 BY THE TOTAL NUMBER OF EXEMPTIONS CLAIMED ON FORM 1040, LINE 6D 10,950.
3. ENTER THE AMOUNT FROM FORM 1040, LINE 38 1,500,387.
4. ENTER THE AMOUNT FOR YOUR FILING STATUS 250,200.
 SINGLE \$166,800
 MARRIED FILING JOINTLY OR WIDOW(ER) \$250,200
 MARRIED FILING SEPARATELY \$125,100
 HEAD OF HOUSEHOLD \$208,500
5. SUBTRACT LINE 4 FROM LINE 3 1,250,187.
6. IS LINE 5 MORE THAN \$122,500 (\$61,250 IF MARRIED FILING SEPARATELY)?
 [X] YES. MULTIPLY \$2,433 BY THE TOTAL NUMBER OF EXEMPTIONS CLAIMED ON FORM 1040, LINE 6D. ENTER THE RESULT HERE AND ON FORM 1040, LINE 42. DO NOT COMPLETE THE REST OF THIS WORKSHEET.
 [] NO. DIVIDE LINE 5 BY \$2,500 (\$1,250 IF MARRIED FILING SEPARATELY). IF THE RESULT IS NOT A WHOLE NUMBER, INCREASE IT TO THE NEXT WHOLE NUMBER (FOR EXAMPLE, INCREASE 0.0004 TO 1) 7,299.
7. MULTIPLY LINE 6 BY 2% (.02) AND ENTER THE RESULT AS A DECIMAL
8. MULTIPLY LINE 2 BY LINE 7
9. DIVIDE LINE 8 BY 3
10. SUBTRACT LINE 9 FROM LINE 2. TOTAL TO FORM 1040, LINE 42.

FORM 1040 TAX-EXEMPT INTEREST STATEMENT 2

NAME OF PAYER	AMOUNT
GOLDMAN SACHS	5,586.
TOTAL TO FORM 1040, LINE 8B	5,586.

FORM 1040 WAGES RECEIVED AND TAXES WITHHELD STATEMENT 3

T S EMPLOYER'S NAME	AMOUNT PAID	FEDERAL TAX WITHHELD	STATE TAX WITHHELD	CITY SDI TAX W/H	FICA TAX	MEDICARE TAX
S GOLDMAN, SACHS & CO.	304,219.	79,329.			6,622.	4,879.
T THE UNIVERSITY OF TEXAS AT AUSTIN	3,750.	17.			233.	54.
TOTALS	307,969.	79,346.			6,855.	4,933.

FORM 1040 QUALIFIED DIVIDENDS STATEMENT 4

NAME OF PAYER	ORDINARY DIVIDENDS	QUALIFIED DIVIDENDS
GOLDMAN SACHS	4,081.	3,467.
FROM K-1 - ENTERPRISE PRODUCTS PARTNERS	1.	1.
TOTAL INCLUDED IN FORM 1040, LINE 9B		3,468.

SCHEDULE A STATE AND LOCAL INCOME TAXES STATEMENT 5

DESCRIPTION	AMOUNT
FROM K-1 - MORGAN LEWIS	44,575.
PAID VIA PASSTHROUGH - MORGAN LEWIS	3,752.
TOTAL TO SCHEDULE A, LINE 5	48,327.



SCHEDULE A	CASH CONTRIBUTIONS	STATEMENT	6
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DESCRIPTION	AMOUNT 50% LIMIT	AMOUNT 30% LIMIT
VARIOUS CHARITIES	9,023.	
SUBTOTALS	9,023.	
TOTAL TO SCHEDULE A, LINE 16		9,023.

SCHEDULE A	ITEMIZED DEDUCTIONS WORKSHEET	STATEMENT	7
1.	ENTER THE TOTAL OF THE AMOUNTS FROM SCHEDULE A, LINES 4, 9, 15, 19, 20, 27, AND 28	154,214.	
2.	ENTER THE TOTAL OF THE AMOUNTS FROM SCHEDULE A, LINES 4, 14, AND 20, PLUS ANY GAMBLING AND CASUALTY OR THEFT LOSSES INCLUDED ON LINE 28.	0.	
3.	IS THE AMOUNT ON LINE 2 LESS THAN THE AMOUNT ON LINE 1? IF NO, YOUR DEDUCTION IS NOT LIMITED. ENTER THE AMOUNT FROM LINE 1 ABOVE ON SCHEDULE A, LINE 29. IF YES, SUBTRACT LINE 2 FROM LINE 1	154,214.	
4.	MULTIPLY LINE 3 BY 80% (.80).	123,371.	
5.	ENTER THE AMOUNT FROM FORM 1040, LINE 38.	1,500,387.	
6.	ENTER: \$166,800 (\$83,400 IF MARRIED FILING SEPARATELY)	166,800.	
7.	IS THE AMOUNT ON LINE 6 LESS THAN THE AMOUNT ON LINE 5? IF NO, YOUR DEDUCTION IS NOT LIMITED. ENTER THE AMOUNT FROM LINE 1 ABOVE ON SCHEDULE A, LINE 29. IF YES, SUBTRACT LINE 6 FROM LINE 5	1,333,587.	
8.	MULTIPLY LINE 7 BY 3% (.03)	40,008.	
9.	ENTER THE SMALLER OF LINE 4 OR LINE 8	40,008.	
10.	DIVIDE LINE 9 BY 1.5	26,672.	
11.	SUBTRACT LINE 10 FROM LINE 9	13,336.	
12.	TOTAL ITEMIZED DEDUCTIONS. SUBTRACT LINE 11 FROM LINE 1. ENTER THE RESULT HERE AND ON SCHEDULE A, LINE 29	140,878.	

SCHEDULE B	TAX-EXEMPT INTEREST	STATEMENT	8
NAME OF PAYER		AMOUNT	
GOLDMAN SACHS		5,586.	
TOTAL TAX-EXEMPT INTEREST TO SCHEDULE B, LINE 1		5,586.	

SCHEDULE D	CAPITAL LOSS CARRYOVER	STATEMENT	9
1. ENTER THE AMOUNT FROM FORM 1040, LINE 41	1,359,509.		
2. DID YOU FILE FORM 8914? X NO. ENTER -0- YES. ENTER THE AMOUNT FROM YOUR FORM 8914, LINE 6			
3. SUBTRACT LINE 2 FROM LINE 1	1,359,509.		
4. ENTER THE LOSS FROM SCHEDULE D, LINE 21, AS A POSITIVE AMOUNT.	3,000.		
5. COMBINE LINES 3 AND 4. IF ZERO OR LESS, ENTER -0-	1,362,509.		
6. ENTER THE SMALLER OF LINE 4 OR LINE 5	3,000.		
7. ENTER THE LOSS FROM SCHEDULE D, LINE 7, AS A POSITIVE AMOUNT	13,758.		
8. ENTER THE GAIN, IF ANY, FROM SCHEDULE D, LINE 15			
9. ADD LINES 6 AND 8	3,000.		
10. SHORT-TERM CAPITAL LOSS CARRYOVER TO 2010. SUBTRACT LINE 9 FROM LINE 7. IF ZERO OR LESS, ENTER -0-	10,758.		
11. ENTER THE LOSS FROM SCHEDULE D, LINE 15, AS A POSITIVE AMOUNT.	23,109.		
12. ENTER THE GAIN, IF ANY, FROM SCHEDULE D, LINE 7			
13. SUBTRACT LINE 7 FROM LINE 6. IF ZERO OR LESS, ENTER -0-			
14. ADD LINES 12 AND 13			
15. LONG-TERM CAPITAL LOSS CARRYOVER TO 2010. SUBTRACT LINE 14 FROM LINE 11. IF ZERO OR LESS, ENTER -0-	23,109.		

SCHEDULE E	OTHER EXPENSES	STATEMENT	10
CONDO - 3333 ALLEN PKWY UNIT 2606, HOUSTON, TX 77019			
DESCRIPTION	AMOUNT		
HOMEOWNERS' ASSOC DUES	6,536.		
TOTAL TO SCHEDULE E, PAGE 1, LINE 18	6,536.		

SCHEDULE SE	NON-FARM INCOME	STATEMENT	11
DESCRIPTION	AMOUNT		
MORGAN LEWIS	1,338,253.		
TOTAL TO SCHEDULE SE, LINE 2	1,338,253.		

FORM 6251 INTEREST FROM SPECIFIED PRIVATE ACTIVITY BONDS STATEMENT 12

DESCRIPTION	AMOUNT
GOLDMAN SACHS	1,097.
TOTAL TO FORM 6251, LINE 13	1,097.

FORM 6251 DEPRECIATION ON ASSETS PLACED IN SERVICE AFTER 1986 STATEMENT 13

DESCRIPTION	AMOUNT
FROM K-1 - MORGAN LEWIS	1,291.
TOTAL TO FORM 6251, LINE 19	1,291.

FORM 8582 ACTIVE RENTAL OF REAL ESTATE - WORKSHEET 1 STATEMENT 14

NAME OF ACTIVITY	CURRENT YEAR		PRIOR YEAR UNALLOWED LOSS	OVERALL GAIN OR LOSS	
	NET INCOME	NET LOSS		GAIN	LOSS
CONDO - 3333 ALLEN PKWY UNIT 2606, HOUSTON, TX 77019	0.	<16,878.>	<7,651.>		<24,529.>
RENTAL HOUSE - 1510 HARTFORD RD, AUSTIN, TX 78703	0.	<26,829.>	<16,654.>		<43,483.>
TOTALS	0.	<43,707.>	<24,305.>		<68,012.>

FORM 8582 ALLOCATION OF UNALLOWED LOSSES - WORKSHEET 5 STATEMENT 15

NAME OF ACTIVITY	FORM OR SCHEDULE	LOSS	RATIO	UNALLOWED LOSS
CONDO - 3333 ALLEN PKWY UNIT 2606, HOUSTON, TX 77019	SCH E	24,529.	.360656943	24,529.
RENTAL HOUSE - 1510 HARTFORD RD, AUSTIN, TX 78703	SCH E	43,483.	.639343057	43,483.
TOTALS		68,012.	1.000000000	68,012.

FORM 8582

ALLOWED LOSSES - WORKSHEET 6

STATEMENT 16

NAME OF ACTIVITY	FORM OR SCHEDULE	LOSS	UNALLOWED LOSS	ALLOWED LOSS
CONDO - 3333 ALLEN PKWY UNIT 2606, HOUSTON, TX 77019	SCH E	24,529.	24,529.	
RENTAL HOUSE - 1510 HARTFORD RD, AUSTIN, TX 78703	SCH E	43,483.	43,483.	
TOTALS		68,012.	68,012.	

FORM 8582

SUMMARY OF PASSIVE ACTIVITIES

STATEMENT 17

R R E A NAME	FORM OR SCHEDULE	PRIOR GAIN/LOSS YEAR C/O	NET GAIN/LOSS	UNALLOWED LOSS	ALLOWED LOSS
X CONDO - 3333 ALLEN PKWY UNIT 2606, HOUSTON, TX	SCH E	<16,878.>	<7,651.>	<24,529.>	24,529.
X RENTAL HOUSE - 1510 HARTFORD RD, AUSTIN, TX 78703	SCH E	<26,829.>	<16,654.>	<43,483.>	43,483.
TOTALS		<43,707.>	<24,305.>	<68,012.>	68,012.

PRIOR YEAR CARRYOVERS ALLOWED DUE TO CURRENT YEAR NET ACTIVITY INCOME

TOTAL TO FORM 8582, LINE 16

FORM 8582

MODIFIED AGI

STATEMENT 18

INCOME

WAGES, SALARIES, TIPS ETC.		307,969.
DIVIDEND INCOME		4,090.
TAXABLE REFUNDS		
ALIMONY RECEIVED		
TAXABLE IRA DISTRIBUTIONS		
TAXABLE PENSIONS AND ANNUITIES		
UNEMPLOYMENT COMPENSATION		
OTHER INCOME		
INTEREST INCOME	997.	
ADD: SERIES EE AND I EXCLUSION		
		997.
BUSINESS INCOME OR LOSS		
ADD: PASSIVE LOSSES		
SUBTRACT: PASSIVE INCOME		
SALE OF ASSETS (BEFORE CAPITAL LOSS LIMITATION)	<36,867.>	
ADD: PASSIVE/RREA PROFESSIONAL LOSSES		
SUBTRACT: PASSIVE INCOME		
	LIMITED	<3,000.>
RENTAL, ROYALTY OR PASSTHROUGH INCOME OR LOSS	1,268,114.	
ADD: PASSIVE/RREA PROFESSIONAL LOSSES		
SUBTRACT: PASSIVE INCOME		
		1,268,114.
FARM OR FARM RENTAL INCOME OR LOSS		
ADD: PASSIVE/RREA PROFESSIONAL LOSSES		
SUBTRACT: PASSIVE INCOME		
TOTAL INCOME		1,578,170.

ADJUSTMENTS

MOVING EXPENSES		
SELF-EMPLOYED HEALTH INSURANCE DEDUCTION	4,474.	
PENALTY ON EARLY WITHDRAWAL OF SAVINGS		
ALIMONY PAID		
KEOGH/SEP DEDUCTION	49,000.	
OTHER ADJUSTMENTS		
TOTAL ADJUSTMENTS		53,474.
TOTAL TO FORM 8582, LINE 7		1,524,696.

FORM 8582

ALTERNATIVE MINIMUM TAX
ACTIVE RENTAL OF REAL ESTATE - WORKSHEET 1

STATEMENT 19

NAME OF ACTIVITY	CURRENT YEAR		PRIOR YEAR UNALLOWED LOSS	OVERALL GAIN OR LOSS	
	NET INCOME	NET LOSS		GAIN	LOSS
CONDO - 3333 ALLEN PKWY UNIT 2606, HOUSTON, TX 77019	0.	<16,878.>	<7,651.>		<24,529.>
RENTAL HOUSE - 1510 HARTFORD RD, AUSTIN, TX 78703	0.	<26,829.>	<16,654.>		<43,483.>
TOTALS	0.	<43,707.>	<24,305.>		<68,012.>

FORM 8582

ALTERNATIVE MINIMUM TAX
ALLOCATION OF UNALLOWED LOSSES - WORKSHEET 5

STATEMENT 20

NAME OF ACTIVITY	FORM OR SCHEDULE	LOSS	RATIO	UNALLOWED LOSS
CONDO - 3333 ALLEN PKWY UNIT 2606, HOUSTON, TX 77019	SCH E	24,529.	.360656943	24,529.
RENTAL HOUSE - 1510 HARTFORD RD, AUSTIN, TX 78703	SCH E	43,483.	.639343057	43,483.
TOTALS		68,012.	1.000000000	68,012.

FORM 8582

ALTERNATIVE MINIMUM TAX
ALLOWED LOSSES - WORKSHEET 6

STATEMENT 21

NAME OF ACTIVITY	FORM OR SCHEDULE	LOSS	UNALLOWED LOSS	ALLOWED LOSS
CONDO - 3333 ALLEN PKWY UNIT 2606, HOUSTON, TX 77019	SCH E	24,529.	24,529.	
RENTAL HOUSE - 1510 HARTFORD RD, AUSTIN, TX 78703	SCH E	43,483.	43,483.	
TOTALS		68,012.	68,012.	

FORM 8582AMT SUMMARY OF PASSIVE ACTIVITIES - AMT STATEMENT 22

R R E A NAME	FORM OR SCHEDULE	GAIN/LOSS	PRIOR YEAR C/O	NET GAIN/LOSS	UNALLOWED LOSS	ALLOWED LOSS
X CONDO - 3333 ALLEN PKWY UNIT 2606, HOUSTON, TX	SCH E	<16,878.>	<7,651.>	<24,529.>	24,529.	
X RENTAL HOUSE - 1510 HARTFORD RD, AUSTIN, TX 78703	SCH E	<26,829.>	<16,654.>	<43,483.>	43,483.	
TOTALS		<43,707.>	<24,305.>	<68,012.>	68,012.	
PRIOR YEAR CARRYOVERS ALLOWED DUE TO CURRENT YEAR NET ACTIVITY INCOME						
TOTAL TO FORM 8582AMT, LINE 16						

FORM 2106/SBE OTHER BUSINESS EXPENSES STATEMENT 23

ATTORNEY

DESCRIPTION	AMOUNT
DUES AND SUBSCRIPTIONS	3,546.
TELEPHONE	3,442.
OFFICE SUPPLIES	279.
TOTAL TO FORM 2106/SBE, PART I, LINE 4	7,267.